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DATE: 17 June 2014

To: Members of the
CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Councillor Pauline Tunnicliffe (Chairman)
Councillor David Jefferys (Vice-Chairman)
Councillors Ruth Bennett, Mary Cooke, Judi Ellis, Peter Fookes, Hannah Gray,
Terence Nathan, Charles Rideout and Melanie Stevens

A meeting of the Care Services Policy Development and Scrutiny Committee will be held at Bromley Civic Centre on **THURSDAY 26 JUNE 2014 AT 7.00 PM**

MARK BOWEN
Director of Corporate Services

Paper copies of this agenda will not be provided at the meeting. Copies can be printed off at www.bromley.gov.uk/meetings. Any member of the public requiring a paper copy of the agenda may request one in advance of the meeting by contacting the Clerk to the Committee, giving 24 hours notice before the meeting.

Items marked for information only will not be debated unless a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss

A G E N D A

PART 1 AGENDA

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

STANDARD ITEMS

- 1 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS**
- 2 DECLARATIONS OF INTEREST**
- 3 QUESTIONS FROM COUNCILLORS AND MEMBERS OF THE PUBLIC ATTENDING THE MEETING**

In accordance with the Council's Constitution, questions to this Committee must be received in writing four working days before the date of the meeting. Therefore please ensure that questions are received by the Democratic Services Team by 5pm on Friday 20th June 2014.

4 QUESTIONS TO THE CARE SERVICES PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

In accordance with the Council's Constitution, questions to the Portfolio Holder must be received in writing four working days before the date of the meeting. Therefore please ensure that questions are received by the Democratic Services Team by 5pm on Friday 20th June 2014.

5 MINUTES OF THE MEETINGS OF CARE SERVICES PDS COMMITTEE HELD ON 11TH MARCH AND 4TH JUNE 2014 (Pages 5 - 24)

6 CARE SERVICES PDS CO-OPTED MEMBERS SELECTION (Pages 25 - 28)

7 WORK PROGRAMME AND MATTERS ARISING (Pages 29 - 36)

HOLDING THE PORTFOLIO HOLDER TO ACCOUNT

8 PRE-DECISION SCRUTINY OF REPORTS TO THE CARE SERVICES PORTFOLIO HOLDER

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

a CARE SERVICES PORTFOLIO PLAN PRIORITIES JUNE 2014 - MAY 2015 (Pages 37 - 52)

b FINAL OUT-TURN REPORT 2013/14 (Pages 53 - 70)

c CARE SERVICES PORTFOLIO BUDGET MONITORING 2014/15 (To Follow)

d ADULTS TRANSPORT POLICY (Pages 71 - 88)

e FOSTER CARERS MAINTENANCE PAYMENTS (Pages 89 - 94)

f FOSTERING SERVICE ANNUAL REPORT 2013/14 (Pages 95 - 116)

g ADOPTION SERVICE ANNUAL REPORT 2013/14 (Pages 117 - 156)

h MARKET POSITION STATEMENT (Pages 157 - 162)

9 PRE-DECISION SCRUTINY OF REPORTS TO THE EXECUTIVE

a PROPOSAL TO EXTEND THE CONTRACTS FOR DELIVERY OF SUBSTANCE MISUSE SERVICES (Pages 163 - 168)

b ONE SECTION 75 AGREEMENT WITH BROMLEY CCG (Pages 169 - 176)

c SECTION 106 FUNDING FOR HEALTH PROVISION (Pages 178 - 186)

d **TRANSPORT GATEWAY REVIEW** (Pages 187 - 196)

e **CORPORATE PARENTING STRATEGY** (Pages 197 - 218)

POLICY DEVELOPMENT AND OTHER ITEMS

10 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The briefing comprises:

- 2013/14 Annual Complaints Report
- Virtual School Annual Report 2013/14
- Outcome of Court Pilot Project (CSC)
- ECHS Contract Activity Update Apr-Sept 2014

Members and Co-opted Members have been provided with copies of the briefing via email. The briefing is also available on the Council's website at the following link:

<http://cds.bromley.gov.uk/ieListMeetings.aspx?CId=559&Year=0>

Printed copies of the briefing are available on request by contacting the Democratic Services Officer.

This item will only be debated if a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss. In addition, questions on the briefing should also be sent to the Clerk at least 24 hours before the meeting.

11 HOUSING SERVICES 2014 -15 PRIORITIES (Pages 219 - 234)

12 REPORT ON CONSULTATION ON SHORT BREAKS FOR DISABLED CHILDREN & YOUNG PEOPLE (Pages 234 - 256)

13 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

14 EXEMPT MINUTES OF THE CARE SERVICES PDS COMMITTEE MEETING HELD ON 11TH MARCH 2014 (Pages 257 - 258)

Information relating to the financial or business affairs of any particular person (including the authority holding that information)

15 PRE-DECISION SCRUTINY OF A PART 2 REPORT TO THE CARE SERVICES PORTFOLIO HOLDER

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| <p>a GROUP BASED SHORT BREAKS FOR DISABLED CHILDREN AND YOUNG PEOPLE - CONTRACTS EXTENSION
(Pages 259 - 264)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
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16 PRE-DECISION SCRUTINY OF PART 2 REPORTS TO THE EXECUTIVE

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| <p>a AWARD OF CONTRACT FOR A COMMUNITY WELL-BEING SERVICE FOR CHILDREN AND YOUNG PEOPLE
(Pages 265 - 272)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
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| <p>b DIRECT CARE UPDATE</p> <p>The report for this item is provided under separate cover.</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
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| <p>c SECTION 106 FUNDING FOR HEALTH PROVISION (Pages 273 - 274)</p> <p>To consider Appendix 2 of the report for this item under exempt proceedings.</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
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17 OTHER PART 2 ITEM

- | | |
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| <p>a REFERENCE FROM GENERAL PURPOSES AND LICENSING COMMITTEE: DOMICILIARY CARE
(Pages 275 - 280)</p> | <p>Information relating to the financial or business affairs of any particular person (including the authority holding that information)</p> |
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CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 7.00 pm on 11 March 2014

Present:

Councillor Pauline Tunnicliffe (Chairman)
Councillor David Jefferys (Vice-Chairman)
Councillors Reg Adams, Ruth Bennett, Roger Charsley,
John Getgood, Mrs Anne Manning, Catherine Rideout and
Charles Rideout

Angela Clayton-Turner, Linda Gabriel, Brian James,
Bebert Longi, Leslie Marks and Lynne Powrie

Also Present:

Councillor Robert Evans, Councillor Peter Fortune and
Councillor Diane Smith

163 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

An Apology was received from Brebner Anderson. Councillor Ruth Bennett submitted an apology as she would need to leave the meeting for a brief period.

164 DECLARATIONS OF INTEREST

Councillor Pauline Tunnicliffe declared that she was a foster carer for the Council.

Councillor Mrs Anne Manning declared that she was a member of the Fostering Panel.

Leslie Marks declared that she had a son in a care home funded by the Council.

Councillor Reg Adams declared that his wife was a member of the Bromley Community Counselling Service.

Brian James declared an interest as a Shared Placement Provider and had a son in a supported living scheme.

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

Three written questions were received from Ms Sue Sulis and these are attached with the answers at Appendix A.

166 QUESTIONS TO THE CARE SERVICES PORTFOLIO HOLDER FROM MEMBERS OF THE PUBLIC AND COUNCILLORS ATTENDING THE MEETING

No questions were received.

167 MINUTES OF THE MEETING OF CARE SERVICES PDS COMMITTEE MEETING HELD ON 22ND JANUARY 2014

Officers provided an update on the national mortgage rescue scheme; 10 more cases were completed and the scheme was now closed.

RESOLVED that the minutes of the meeting held on 22nd January 2014 be agreed.

168 WORK PROGRAMME AND MATTERS ARISING

The Committee noted the work programme and matters arising from previous meetings.

The Chairman noted that she had also attended visits to Bertha James Day Centre and to Greenhill Nursing Home.

It was also noted that the Health and Wellbeing Board meeting Scheduled for the 22nd May would be changing as this was the day of the Local and European elections.

RESOLVED that the work programme and matters arising from previous meetings are noted.

169 PRE-DECISION SCRUTINY OF CARE SERVICES PORTFOLIO REPORTS

A) THE CARE SERVICES PORTFOLIO BUDGET MONITORING 2013/14

Members considered a report that provided the budget monitoring position for 2013/14 based on activity up to the end of January 2014.

The pressures in the Portfolio were in three main areas, Adult Social Care, Operational Housing and Children's Social Care. The pressures became apparent at the end of the 2012/13 financial year but this trend had continued in 2013/14 with the budget pressures increasing. Although this had been offset by savings in other areas, the full year effect pressures continue to rise. The full year effect stands at £1,757k an increase of £451k from the previous

monitoring. This was in the main due to increases in Assessment and Care Management.

Officers advised that overall the current overspend position was £36k underspent (£1,757k full year effect).

The grant of £285,000 had been fully allocated by the end of January but expenditure was continuing. It was likely that spend would continue against this heading until April and that there would be the need to allocate some of the previous year's winter pressures fund as discussed and agreed previously. He requested therefore that this be brought to the attention of Executive as it would not be possible to bring a paper back before the year end showing the reconciliation.

An additional paper was tabled in relation to the carry forward S256 funding in contingency. Members noted that the Council received NHS Support for Social Care monies as part of S256 agreements during 2010/11 to 2012/13 which had been partly earmarked for invest to save schemes. A balance of £1.937m remained from that period.

As part of the agreement with Bromley PCT (now Bromley CCG) the Council had met its obligations relating to identifying services (NHS/Social Care) within its overall budget.

As part of the wider agenda of integration of health and social care, Members were requested to seek Executive's approval to set aside these monies as an earmarked reserve to support future integration and investment initiatives.

Future release of these monies would require consideration by the Care Services PDS and the approval of the Executive. To allow for this an additional recommendation was proposed to which the Portfolio Holder gave his verbal agreement at the meeting.

The Chairman remarked that at the beginning of the municipal year the Portfolio had a projected overspend of £2m and was pleased to note that this had been "turned around" by officers. She extended her gratitude to them.

RESOLVED that:

- 1. The latest projected underspend of £36k is forecast on the controllable budget, based on information as at January 2014 are noted;**
- 2. The full year effect for 2014/15 of £1.757m in paragraph 3.13 which has increased from the £1,306k previously reported is noted;**
- 3. Note the comments of the Executive Director in paragraph 6.**
- 4. The Portfolio Holder is requested to approve the report**

5. **The Executive is requested to agree to set aside funding of £1.937m in an earmarked reserve as detailed in paragraph 3.17 of the additional paper circulated.**
6. **The latest projected underspend of £36k is forecast on the controllable budget, based on information as at January 2014 are noted;**
7. **the full year effect for 2014/15 of £1.757m in paragraph 3.13 which has increased from the £1,306k previously reported is noted.**

B) CAPITAL PROGRAMME MONITORING Q3 2013/14 & ANNUAL CAPITAL REVIEW 2014 TO 2018

On 12th February 2014, the Executive received a report summarising the current position on capital expenditure and receipts following the 3rd quarter of 2013/14 and presenting for approval the new capital schemes supported by Council Directors in the annual capital review process. The Executive agreed a revised Capital Programme for the five year period 2013/14 to 2017/18.

Officers reported that not all the Payment in Lieu fund would be spent in this financial year as one of the schemes had not developed as quickly as expected.

RESOLVED that the report is noted.

C) NEW NATIONAL ADULT SOCIAL CARE DATA FUNDING - UPDATE ON 2013/14

In July 2013 the Department of Health announced new burden funding to support the development and implementation of new adult social care and financial statutory reporting during the 2013/14 financial year and 2014/15. This authority received a non-ring fenced grant of £59,058 to support the cost of these new statutory requirements.

The Executive also asked that a project update be provided at regular intervals and this report provided the first update, five months into the project.

Currently it was estimated that there would be a reduction of £16,000 in the use of the non-ring fenced grant as it had been possible to absorb some staffing costs into revenue budgets. The next update on progress with this project was due in six months when further details on actual costs would be available.

Members noted the expenditure of £8500 on consultancy fees and officers reported that it was unlikely that the full ten days would be needed.

Officers explained that any underspends within this grant allocation would be returned to the Council's general balance and did not have to be returned to the Department of Health.

An update report would be provided in September.

RESOLVED that

1. **The report is noted.**
2. **The Executive is requested to approve the carry forward of £33,000 of the non-ring fenced grant to 14/15 and agree the return of an estimated underspend of £16,000 back to general balances.**

D) GATEWAY REVIEW OF LEARNING DISABILITY SERVICES

Education, Care & Health Services Commissioning were seeking opportunities to co terminate existing contracts in order to tender groups of similar services; this approach offers significant advantages for the Council including:

- Lower bids resulting from economies of scale
- More efficient use of Council resources
- Tenders that are more attractive for providers

An opportunity to group 5 existing schemes, covering 31 service users with learning disabilities, had been identified. The current value of the 5 schemes was £1,795,182 per annum. With a proposed 5 year contract, the cumulative value of a tender would be £8,975,910.

In order to achieve a suitable group of contracts for tendering, agreement was sought for an exemption from tendering for a limited period to enable 2 existing contracts to co-terminate with 3 other scheme contracts.

Brian James raised concerns that there needed to be a focus on the quality requirements of the tenders and that service users would be consulted in a way that they could understand. He referred to a letter sent to a service user and that he himself had problems understanding so adults with Learning difficulties would not have been able to understand it at all.

The Chairman suggested that a copy of the letter was sent to the Director who would then follow it up. The Portfolio Holder added that he had sympathy with the situation regarding the letter and also reassured Mr James that bringing together contracts in this way would not result in a drop in service.

RESOLVED that

1. **The report is noted.**

2. The Portfolio Holder is requested to agree:

- a) **to co-terminating existing contracts and grouping them together for tendering in order to drive the best possible pricing and;**
- b) **exemption from tendering the following contracts:**
 - i **Swingfield Court to the Avenues Trust for the period 22/6/2014 to 10/1/2015 at a cost of £355,945**
 - ii **Widmore Road to the Avenues trust for the period 19/7/2014 to 10/1/2015 at a cost of £125,370**

in order for them to co-terminate with 3 other schemes and provide a suitable volume for the proposed tender.

- c) **to extend (under existing delegated authority) the Amplio House contract with the Avenues Trust for the period 1/9/2014 to 10/1/2015 at a cost of £177,929**

E) GATEWAY REVIEW OF TENANCY SUPPORT SCHEMES FOR YOUNG PEOPLE

The current contracts for Tenancy Support Services for Young People would end on 30th August 2014. Members considered a report which reviewed the outcomes achieved by the current service, the on-going demand and plans for the future commissioning of these services.

Expenditure on Supporting People Services for young people assisted the Council in meeting its statutory duties under homeless and children in need legislation in a cost effective manner.

The Council had 2 current contracts with One Support; Supported Accommodation and Floating Support, which delivered tenancy support services to young people. The contracts were let by competitive tender in 2011 and were for a period of 2 years with an option to extend for a further year. The option to extend was taken up and the contracts now ended on 30th August 2014. Members noted that there were 59 units spread across 9 schemes.

The programme benefited young people who were leaving care, homeless young people and teenage parents who are assisted whilst living in supported accommodation, in temporary accommodation or in their own tenancies. The programme provided housing related support to assist with the development of key life skills needed to sustain a tenancy and to obtain and manage welfare benefits and could help the smooth transition to independent living for those leaving an institutionalised environment.

A gateway review always included consideration of whether there was a need to continue to provide the service. These tenancy support services were not a statutory requirement, however they were developed to enable the authority to

meet the duty to homeless young people under the Homelessness (Priority Need for Accommodation) (England) Order 2002 (SI 2002/2051), article 3, which includes children aged 16 and 17 within the list of priority groups.

Contract procedure rules required that this tenancy support contract was tendered again, although the current contract had only run for a total of 3 years. The supported accommodation contract was complex and as part of a decision to re-tender the contract it was necessary to consider in detail the impact of a change of provider on service delivery and on the management of the supported accommodation.

Officers had also identified that the complexity of dealing with housing management arrangements with 4 different landlords would further reduce the support time available to young people through the contract. The current provider had made formal agreements and forged relationships with the landlords, all of which would be a drain of time on a new provider. Three of the landlords had confirmed that the properties would remain available to the Council for the purpose of supported housing. The fourth would not commit themselves at this stage. If this landlord chose to withdraw their properties from the scheme this would result in a loss of 21 units, however the Council could contest this decision as considerable public funding was made available for the conversion of these for the purpose of supported housing.

The Chairman requested that officers arrange a visit to two of the schemes; one in the north of the borough and the other in the Orpington area.

RESOLVED that:

- 1. a new contract by negotiation with One Support for a period of 3 years with the potential to extend for a further 2 years be agreed subject to the negotiation of efficiency savings either in the unit price or by a reconfiguration of the service. Authority to take up the option to extend is to be delegated to the Executive Director for Education, Care and Health Services in consultation with the Portfolio Holder.**
- 2. It be agreed that If a competitive tendering exercise is required Members are requested to agree to a short extension for 3 months from 1st September 2014 to 30th November of the current contract with One Support in order to ensure that arrangements between a new provider and the landlords and the staff transferring under TUPE regulations can be managed in an orderly manner. This extension may also enable the Council to procure using the new Supporting People Framework which is currently being developed by Southwark and Lewisham to which the Council will be a party.**
- 3. It be agreed that If the negotiations with One Support are satisfactory the outcome will be reported to Members. If the negotiations are not successful officers will proceed with a**

procurement exercise and will request authority from Members to make a contract award at the appropriate time.

170 LEARNING DISABILITY EMPLOYMENT SUPPORT - CONTRACT AWARD

Officers presented a report concerning the delivery of a supported employment service for adults with a learning disability.

The Shaw Trust currently provided supported employment services to 130 adults with a learning disability. These services were included within the market testing of adult learning disability services that were currently being progressed. A large amount of planning and transitional work was required to ensure service continuity and minimise any potential disruption and anxiety for service users.

The Shaw Trust contract was due to expire on 5th July 2014 and the Portfolio Holder was requested to approve an exemption from tendering for a maximum of 12 months whilst providers took part in the market testing of adult learning disability services:

- Develop understanding of the supported employment services provided by the Shaw Trust
- Decide if they will be continuing with the existing supported employment services and develop transfer arrangements or;
- Develop alternative social businesses within Bromley that service users can transfer to.

The Shaw Trust stated they wished to withdraw from providing supported employment services in Bromley at the end of the contract but were willing to continue to provide the service as long as the Council required, in order to put alternative arrangements in place.

Officers reported that they were unaware as to the reasons why the Shaw Trust no longer wished to continue with the contract, however it was likely that they want to concentrate on other areas. In 2005 when the contract was first let there were very few providers of this type of service but in the nine years since there had been an increase in providers which Bromley would be able to consider.

Brian James raised concerns about the needs of some individuals and it was agreed these would be considered outside of the meeting.

An update report would be provided in 6 months.

RESOLVED that

- 1. the report is noted**

- 2. The Portfolio Holder is requested to agree the exemption from tendering and the award of the contract for supported employment services to the Shaw Trust for a maximum period of 12 months from 6th July 2014 at a cost of £400,330**

171 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The information briefing comprised an update on the Assessment and Care Management.

Officers reported that the actions taken had meant that training had been undertaken and that the LBB Assessment and Care Management staff were now better equipped to make Continuing Health Care (CHC) referrals. It was also noted that more people had been referred to Bromley Clinical Commissioning Group (CCG) for a CHC assessment.

Of the initial 61 people identified as needing assessment some had died or moved out of the borough. Where this had happened efforts were being made to claw back any expenditure Bromley should not have incurred. To date the CCG had accepted responsibility for 15 cases which provide savings of £98k in this financial year and £128k full year effect. This equated to approximately £14k per case.

Officers were monitoring the backlog and were unable to say how many cases would be reviewed until after the cases had been assessed.

The problem for the CCG was that they were dealing with the aftermath of the previous assessment process and all CCG's appeared to have this same problem.

RESOLVED that the information briefing is noted.

172 PRUH A&E PERFORMANCE

The Chairman welcomed Paul Donoghue, Assistant Medical Director and Site Lead for Princess Royal University Hospital and Briony Sloper, Deputy Divisional Manager in Trauma, Emergency and Acute Medicine to the meeting.

She asked how the exercise "The Perfect Week" was progressing. Mr Donoghue was pleased to report that they were seeing some positive results and a "coming together" with external partners. The previous Friday had seen 94% of A&E patients dealt with within 4 hours. This had been tougher to reach over the weekend and on the Monday as this was the day that the majority of elective surgery patients were admitted. He explained that there had been lots of de-briefs which had highlighted ideas for improvement and progression, he was grateful to the external partners for their involvement in the exercise. Ms Sloper added that she had seen a rise in staff morale since the exercise had commenced on Friday 7th March. During the exercise it was

demonstrated that staff were able to escalate issues this had been raised previously by staff as an area of concern.

Members asked if there were still difficulties in recruiting staff and were informed that they had been able to appoint at consultant level but had great difficulty recruiting to nursing posts. They had a rolling recruitment process which was now extended to Ireland, Scotland and overseas and this was a joint recruitment drive with the Denmark Hill site. When Kings acquired the PRUH they immediately looked to increase the staff including nurses and porters.

Members asked why there was a problem in recruiting nursing staff. Ms Sloper explained that there were now fewer training places available and that many nurses completed their training and then went abroad. Every trust was trying to recruit at present which caused added pressures. When asked about training their own nurses Ms Sloper explained that they encouraged other staff to take up nursing but this had to be linked to a formal process.

When questioned about the recent maintenance issues that had resulted in problems with the boilers Ms Sloper was pleased to report that this had not resulted in having to close operating theatres. She was unclear as to what had caused the problem but it was being rectified.

When asked about dealing with people who had consumed too much alcohol presenting at A&E and the steps other areas had taken to avoid this Ms Sloper reported that they used the “booze bus” at other sites but in terms of the PRUH A&E it did not have a high level of patients presenting as a result of alcohol. In addition there were cyclical patterns around the type of patients received; during the summer period it was quieter but the number of paediatric cases increased and in the winter it was elderly patients and falls.

The pressure points for the hospital as a whole are on a Monday and Tuesday. A&E is busier, there are a larger number of ambulances waiting and all elective surgery admissions take place. The Trust was looking at all these areas. As well as increasing the number of staff on duty on Mondays and Tuesdays they had also increased staff at the weekends, to include services such as physiotherapy and x-ray staff. In addition staff at the Denmark Hill site covered shifts at the PRUH to share expertise.

The Trust also recognised that some of the delays in discharge were due to waits for medication and were working with the pharmacy to increase opening hours but also to get patient drugs ready for discharge the previous day.

The Vice-chairman asked about the professional standards in the hospital and how the Clinical Decision Unit (CDU) was progressing. Mr Donoghue reported that medical staff were not well engaged and the doctor/manager and doctor/nurse relationships were poor. However “the Perfect Week” and external support from NHS England was helping.

The CDU was being delivered at the end of April, staff had been recruited and the pathways were done. Ms Sloper reported that the Denmark Hill site had a very successful CDU model and that gerontology was the key to making it a success as the unit was able to “turn around” patients in 18 hours with rapid access to clinics, meaning that patients could return home rather than be admitted to await clinic appointments.

Members requested that the outcomes from “The Perfect Week” were circulated to the committee.

Mr Donoghue reported that another area being investigated was looking at the availability of consultants and senior and junior doctors over weekends and at specialties not normally found in a general hospital. The intention was to have specialists available 24/7.

Ms Sloper explained that it is possible to avoid unnecessary hospital admissions for patients with some conditions by giving them good quality preventive and primary care – their illnesses are known as ambulatory care-sensitive conditions. She explained that to achieve this in Bromley there would be a set of recommendations for key conditions including how they should be screened, treated and managed within the community.

Members raised concerns about discharging vulnerable or elderly patients at the weekend without the necessary services in place. Ms Sloper explained that work had taken place with the Red Cross and Age UK who would offer a “settling Service” covering the practical issues such as ensuring the heating is on and that there is food in the home. This service was in place at the Denmark Hill site and working well.

Members asked about the Trust’s plans once the “Perfect Week” exercise was over. Mr Donoghue said that the lessons learned would be implemented; there were some “quick wins” such as allowing the Emergency Department to direct dial out rather than go through the switchboard. Other areas would be improved, including treatment pathways and adherence to agreed standards.

Meetings were taking place with social care and community services to draw up a list of actions. This information would be included in a report on the outcomes which would be presented to the committee in due course.

The Chairman thanked Mr Donoghue and Ms Sloper for attending the meeting and invited the Trust to attend the Health Scrutiny Sub-Committee on the 9th April to share the learning from the “perfect week”.

173 SIX MONTH REVIEW OF PARTNERSHIP FRAMEWORK

The Care Services Portfolio Holder and Education Portfolio Holder jointly commissioned a review of the partnership arrangements that were supported either financially or with other resources by the London Borough Bromley’s Education, Care and Health Services department in June 2012.

The Chairman of the Care Services Policy Development and Scrutiny Committee requested that an update report be brought to the Care Services Policy Development and Scrutiny Committee in March 2014 to review the new framework following implementation.

The partnership framework consisted of four interconnecting strands: Stakeholder Conferences, Virtual service user panel, Service user and carer forums and Task and finish project groups. Alongside these, there are a number of other arrangements which would influence decision making, service development and priorities across the borough. These included groups which were commissioned and facilitated by the borough and its key partner organisations, and also groups and organisations which were self-supported; Bromley Safeguarding Adults Board; Bromley Safeguarding Children Board; Healthwatch Bromley; other service user led bodies and forums; provider forums; and the Voluntary Sector Strategic Network.

Officers provided feedback from the recent Adult Stakeholder Conference. The event was attended by a range of professionals, forum members, strategic partners and statutory partners. Places were also offered to carers although some were unable to attend on the day but were encouraged to feed in their comments using Twitter. A detailed list of attendees is attached to these minutes.

Leslie Marks commented that there appeared to be an assumption that with the withdrawal of funds things would continue as they were. However, the mechanisms that underpinned the existing forums were at risk due to the cuts and that they may disappear as a result.

Members noted that the Children's Services Stakeholder Conference would take place on 27th March 2014.

RESOLVED that the report is noted.

174 TACKLING TROUBLED FAMILIES - OUTCOMES UPDATE

The Tackling Troubled Families project was a Government initiative based on payment by results focusing on local authorities supporting households who were involved in crime and anti-social behaviour (ASB), had children not in school, training or employment an adult on out of work benefits or who caused high cost to the public purse.

LB Bromley worked with 490 families across 3 years. This had attracted revenue income as attachment grant funding to the Council for 163 families in Year 1 totalling £535,200, 245 families in Year 2 totalling £589,600, and 82 families in Year 3 totalling £208,800. Due to the nature of payment by results and the necessity to provide evidence for outcomes for individual families, the final income total for the payment by results element for each year was not set or guaranteed.

The identification of families continues. Bromley are required to identify and turn around 490 families over a 3 year period between 2012 and 2015. To date 442 (90%) families had been identified. This is higher than expected for year 2.

Internal Audit had been integrated into the TTF programme in Bromley and completed an audit of the project in July 2013. This was positive and took place before the first set of outcomes were submitted to the Department of Communities and Local Government (DCLG). They have advised they intend undertaking a further audit sometime in 2014. Ensuring appropriate verification against the criteria was important as in one case a local authority had to claw back a significant number of the outcomes submitted following its audit and were unable to claim their expected payment by results. Within LB Bromley officers had taken a cautious approach to ensure all submissions are valid and would pass audit scrutiny.

Submissions for payment by results were made at times arranged by DCLG. At the end of October 2013, Bromley submitted claims for 52 families. This earned an income of £30,900 as result payments. It was expecting to submit between 80- 100 claims for February /March 2014. Based on the already confirmed 80 families this should provide at least a further £44,800 through payment by results, however this was subject to change due to an increase in families identified and the potential for some families to attract the £800 reward rather than the £700 reward.

The committee asked if it could be provided with anonymised information on one of the families.

RESOLVED that the report is noted.

175 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.

176 CONTRACT AWARD LEARNING DISABILITY DAY CARE

Members considered the contract award for learning Disability Contract and agreed the recommendations.

177 RAPID PRESCRIBING - CONTRACT AWARD

Members considered the award of the contract for Rapid Prescribing and agreed the recommendations.

The Meeting ended at 8.45 pm

Chairman

Questions from Susan Sulis, Secretary, Community Care Protection Group

Q.1 CARE QUALITY COMMISSION FINDINGS OF EXCESSIVE WAITING TIMES AT DEC. 2013 INSPECTION AT THE PRINCESS ROYAL UNIVERSITY HOSPITAL TRUST.

An 88 year-old stroke patient was found waiting 22 hours in A&E, before being admitted for specialist care, and another 10 patients waited more than 12 hours.

LBB and Bromley PCT have always supported plans for closure of in-patient beds.

Does this Committee consider that those were the correct decisions?

LB Bromley Response

The London Borough of Bromley has recognised that for many years the service it's residents receives from the PRUH has been less than we would want to see. However, there is no simple link between waiting times and beds. With good bed management, waiting times would be lower: with poor bed management, they go up. The issue then is one of the management of the patient pathways as much as the numbers of beds. Until we are confident that patient pathways are managed in line with the best hospitals in the country, it remains very hard to form a view of the correct number of beds needed to serve the local population.

Response from Bromley CCG

All agencies are working to avoid patients remaining in A&E longer than 4 hours before being discharged or admitted to a ward. It is unfortunate that there have been occasions recently where patients have spent long time periods in A&E. Where this happens, the hospital ensures that the quality of care given to patients is equivalent to that on a ward, with extra surveillance and care from doctors and nurses. Local commissioners (the CCG) and NHS England review these arrangements and the causes of the situation on a case by case basis.

We need to ensure that we have the right number of beds for the population. Whilst the overall number of beds in a hospital may be correct, the number of specialty beds also needs to be kept under review. The CCG, KCH and London Borough of Bromley are working together to ensure that we have the right balance of services in hospital and out of hospital for the populations we serve, and this includes in patient beds and care outside the acute setting

The Care Quality Commission required that KCH worked to reduce the long waits in A&E and the trust is working to achieve this, particularly ensuring that patients do not wait over 12 hours. As part of this work, the Trust is

implementing improvements to the timeliness of treatment in all parts of the hospital. Other hospitals which have followed this approach have successfully reduced the demand on beds, reduced the time patients wait in A&E as well as how long patients stay in hospital overall whilst at the same time improving patient experience. Good care and good patient experience can be achieved with a reduction in in-patient beds.

Hospitals are only one part of the health and social care system. Hospitals should be used for the periods that people are acutely ill. For many patients longer stays in hospital can have adverse effects. We need to ensure that all parts of our health and social care system work effectively and patients can access them at the right time.

Q. 2 PREMATURE DISCHARGE OF ELDERLY PATIENTS FROM THE PRINCESS ROYAL UNIVERSITY TRUST. (Ref. Min. 151 of 22 Jan 2014 CS PDS Cttee – p.11 on this agenda).

The Minute claims that “Concerns were raised that “some elderly patients were being discharged before they are ready”.

- (a) What are the reasons this is happening?**
- (b) Is it related to shortages of acute and rehabilitation beds?**
- (c) Why aren't these patients referred to Rehabilitation Step-down beds or the Rehabilitation Service?**

Response from Bromley CCG

Thank you for your enquiry and subsequent questions. The CCG is confident that the Trust is working to ensure that all that can be done is being done to maintain levels of patient safety and thus provide a quality service to all. If a poor discharge is reported the Trust is very quick to respond and see that processes are improved. In response to the specific points that you raise, I hope the following responses answer your questions.

a) It is our understanding from Kings College Hospital that full medical assessments and decisions are made whenever a patient is admitted or discharged. Therefore, a qualified clinical decision maker will decide whether a patient who has been admitted is medically fit for discharge.

b) Patient safety is considered of primary importance when deciding that a patient is medically fit for discharge.

c) When a patient meets the criteria for discharge to rehabilitation, this decision is made collaboratively between suitably qualified clinicians, nursing and therapy staff. This is a documented process to ensure patient safety and suitability.

Q.3 MEDICAL REFERRAL “FRESH START PLUS” EXERCISE SESSION CLOSURES:- OUTCOMES FOR PATIENTS.

Three years ago, the Director of Public Health, LBB and Bromley Mytime closed these popular, specialist sessions, held for many years in 7 Leisure Centres. The following year, the sessions at the Priory were closed by Mytime.

What have been the outcomes for the chronically sick and disabled users?

Response from LB Bromley

The Fresh Start Exercise Referral programme, delivered by Bromley Mytime, has been running in Bromley since 1998. Over time the number of referrals have steadily increased. The programme was reviewed in 2011 and new evidence based referral criteria were developed. This ensured that patients who are chronically ill with conditions that could be improved by physical activity had continued access to the programme.

Although the number of venues was reduced, the remaining centres were chosen to ensure that patients from the areas of highest need have access to the programme.

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**CARE SERVICES
POLICY DEVELOPMENT AND SCRUTINY COMMITTEE**

Minutes of the meeting held at 7.57pm on 4th June 2014
following the annual meeting of the Council

Present:

Councillor Pauline Tunnicliffe (Chairman)
Councillor David Jefferys (Vice-Chairman)
Councillors Ruth Bennett, Mary Cooke, Judi Ellis,
Hannah Gray, Charles Rideout CVO QPM, Melanie Stevens,
Peter Fookes and Terence Nathan

1 APOLOGIES FOR ABSENCE

There were no apologies for absence.

2 PROPORTIONALITY

RESOLVED that seats on the Sub-Committee of the Care Services PDS Committee be allocated to political groups as follows:

Sub Committee	Size of Sub-Committee	Allocation		
		Conservative	Lab	UKIP
Health Scrutiny Sub-Committee	10	8	1	1

3 APPOINTMENT OF SUB-COMMITTEE

RESOLVED that the following Sub-Committee be appointed for the ensuing Municipal Year, with membership as indicated:-

(i) HEALTH SCRUTINY SUB-COMMITTEE

	Councillors
1	Ruth Bennett
2	Mary Cooke
3	Judi Ellis
4	Hannah Gray
5	David Jefferys
6	Charles Rideout
7	Melanie Stevens
8	Pauline Tunnicliffe

9	Ian Dunn
10	Terence Nathan

4 APPOINTMENT OF CHAIRMAN AND VICE-CHAIRMAN

RESOLVED that the following Councillors be appointed as Chairman and Vice Chairman of the Sub-Committee of the Care Services PDS Committee for the 2014/15 Municipal Year.

(a) Health Scrutiny Sub-Committee

Councillor Pauline Tunncliffe (Chairman)
Councillor David Jefferys (Vice Chairman)

The meeting finished at 7.58pm.

Chairman

Report No.
CS14069

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services PDS Committee

Date: 26th June 2014

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

Title: CARE SERVICES PDS CO-OPTED MEMBERS SELECTION

Contact Officer: Graham Walton, Democratic Services Manager
Tel: 0208 461 7743 E-mail: graham.walton@bromley.gov.uk

Chief Officer: Director of Corporate Services

Ward: (All Wards);

1. Reason for report

1.1 Members are asked to confirm the arrangements for the nomination of Co-opted Membership to the Care Services PDS Committee for 2014 -16. Following the review of ECHS partnership arrangements in 2012/13 it was proposed that the areas being represented by Co-opted Members and the selection process should be examined to ensure that they reflect any changes resulting from the review. This report outlines the proposed new arrangements and timescales for adopting.

2. **RECOMMENDATION(S)**

2.1 **Members of the PDS committee are asked to comment on the proposed framework for selecting co-opted members for 2014 – 16; and,**

2.2 **agree that the:**

- i. **groups listed in section 3.3 are approached for nominations to represent the areas outlined in section 3.4;**
- ii. **timescales for implementing as outlined section 3.5 are adopted;**
- iii. **selected co-opted members are appointed for two years;**
- iv. **selected co-opted members provide the Care Services PDS committee an annual report.**

Corporate Policy

1. Policy Status: Not Applicable:
 2. BBB Priority: Excellent Council:
-

Financial

1. Cost of proposal: No Cost:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre:
 4. Total current budget for this head: £
 5. Source of funding:
-

Staff

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

Legal

1. Legal Requirement: None:
 2. Call-in: Not Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The Care Services PDS committee covers all areas of the Borough – co-opted members will represent the views and interests of a wide range of residents.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 The Borough has a wide range of groups and organisations that represent residents of the borough who have particular needs. The Care Services PDS Committee (including sub committees) has appointed over many years a number of co-opted members (with alternates) to allow representation from key groups in the community. It is recommended that this continues as co-opted members bring their own area of interest and expertise to the work of a PDS Committee and broaden the spectrum of involvement in the scrutiny process.
- 3.2 The Care Services PDS Committee Chairman and ECHS Officers have revised the process for selecting co-opted members and alternates to reflect the changes implemented following the Care Services Portfolio review of partnership engagement arrangements during 2012/13 and changes made by some organisations representing residents.
- 3.3 The dissolution of Disability Voice Bromley was recently agreed by the organisation. It is therefore proposed that there are two representatives covering all disabilities, one from XbyX and one from the Young Advisers Group (supported by Advocacy for All), to replace the representatives for physical disabilities and learning disabilities. It is also proposed that the representative for looked after children comes directly from the Living in Care Council and that the Council on Ageing and the Mental Health Forum be asked to nominate representatives as they have done previously. The refreshed Carers Forum will also be asked to nominate from its membership.
- 3.4 In Summary the following groups will be asked to nominate a representative and alternate to Care Services PDS Committee to represent the interests of key groups of service users and carers in the Borough:

Forum	Representing...
Healthwatch Bromley	all groups
Council on Ageing	older people
Mental Health Forum	adults with mental ill-health
Carers Forum	carers of all ages
Experts by Experience (X by X)	adults with disabilities (including learning disabilities)
Young Advisers	young people with disabilities (including learning disabilities)
Living in Care Council	looked after children

- 3.5 Subject to agreement from Care Services PDS Committee, these groups will be asked to submit nominations for a representative and alternate between 30th June and 25th July. These nominations will be considered by the Care Service PDS Chairman with a view to confirming new co-opted members and alternates at the meeting on 24 September 2014.
- 3.6 Those nominated will be asked to demonstrate that they have a knowledge and experience of their key group that will contribute to discussions at Committee. They will be expected to have access to key community groups where they can share information from PDS meetings and receive issues and questions to raise at the PDS meetings. They will also be asked to prepare a short annual report outlining how this has been undertaken.
- 3.7 Co-opted Members will be selected to serve for two years, unless a new service user group is established which could also equally provide a co-opted member. If this situation arises a review will be undertaken. Co-opted members are not eligible to be paid an allowance, but reasonable travel expenses to attend committee meetings may be claimed.

4. POLICY IMPLICATIONS

- 4.1 Whilst there is no statutory requirement to have co-opted members on the Care Services PDS Committee it is recognised that co-opted members bring their own area of interest and expertise to the work of a PDS Committee and broaden the spectrum of involvement in the scrutiny process. 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.

Non-Applicable Sections:	FINANCIAL LEGAL and PERSONNEL IMPLICATIONS
Background Documents: (Access via Contact Officer)	

Report No.
RES14049

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services PDS Committee

Date: 26th June 2014

Decision Type: Non Urgent Non-Executive Non-Key

Title: CARE SERVICE PDS COMMITTEE MATTERS ARISING AND WORK PROGRAMME

Contact Officer: Helen Long, Democratic Services Officer
Tel: 0208 313 4595 E-mail: helen.long@bromley.gov.uk

Chief Officer: Director of Resources

Ward: (All Wards);

1. Reason for report

- 1.1 Members are asked to review the Care Services PDS Committee's work programme for 2014/15 and to consider progress on matters arising from previous meetings of the Committee, the report also provides an update on the PDS members' visits to day centres and residential homes.

2. **RECOMMENDATION(S)**

- 2.1 **The Committee is asked to consider its work programme and matters arising and indicate any changes that it wishes to make.**
- 2.2 **That Council be requested to authorise participation in a South East London Joint Health Scrutiny Committee.**

Corporate Policy

1. Policy Status: Existing Policy: As part of the Excellent Council stream within Building a Better Bromley, PDS Committees should plan and prioritise their workload to achieve the most effective outcomes.
 2. BBB Priority: Excellent Council
-

Financial

1. Cost of proposal: No Cost:
 2. Ongoing costs:: N/A
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: **£373,410**
 5. Source of funding: 2014/15 revenue budget
-

Staff

1. Number of staff (current and additional): There are 10 posts (8.55fte) 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: Not Applicable: This report does not require an executive 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 matters arising table is attached at **Appendix 1** this report updates Members on recommendations from previous meetings which continue to be "live". Currently there are seven items three will have been completed following this meeting, the remaining four have been scheduled as future items on the PDS 2014/15 work programme.
- 3.3 The draft 2014/15 Work Programme is attached as **Appendix 2**. It reflects the areas already identified at the beginning of the year. Other reports may come into the programme or there may be references from other Committees, the Portfolio Holder or the Executive.
- 3.4 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.
- 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.
- 3.6 The Autumn visits to care homes and day centres are currently being organised. Between September and December there will be six visits. Scheduled dates and times will be sent out to all members of the committee in the next few weeks.
- 3.7 During 2013/14 a total of 15 visits were undertaken across a range of day centres, residential and nursing homes. Eight different members of the PDS committee attended and feedback sheets were completed on many. During 2014/15 we aim to organise around 16 visits to a range of establishments.

4. Six Borough Health Scrutiny Committee

- 4.1 It is proposed that a joint health scrutiny committee is set up comprising the six South East London boroughs of Bromley, Bexley, Greenwich, Lambeth, Lewisham and Southwark. The purpose of the committee is to provide a joint scrutiny function to the changes proposed by Kings Foundation NHS Trust.
- 4.2 Costs from organising and servicing the joint committee would be minimised and would be met from within existing resources across the six boroughs.
- 4.3 An officer from LB Bromley will need to be identified. At present there is no indication as to the proposed number of meetings.

Non-Applicable Sections:	Policy/Financial/Legal/Personnel
Background Documents: (Access via Contact Officer)	Previous work programme reports

Matters Arising 2013/14 progress summary

PDS Minute number/ title	Committee Request	Update	Completion Date
Minute 106 – Work Programme and Matters arising	Both the Annual Report of the Fostering service (Minute 76) and the Annual Report of the Fostering Panel would be added to the work programme.	Scheduled for June 2014.	June 2014
Minute 10b (B) Housing Services 2013/14 Priorities	A further report outlining the incidences of fraud to be brought to a future meeting.	Added to the work programme	June 2014
Minute 134 (A) Children's Social Care Recruitment and Retention Strategy	Officers requested to develop proposed scheme and report back to the committee once	Added to the work programme	September 2014
Minute 135 (A) Financial Implications of changes to the Youth remand Framework	Future reports to include more detailed numbers of the individuals involved.	Added to the work programme	September 2014
Minute 141 Drawdown of the Public Health S256 Monies – NHS Health Check Programme.	Develop full protocol and report to a future meeting	Added to the work programme	September 2014
Minute 141 (A) Adult Social care – Impact of the Care Bill and the Future NHS Funding	Further update reports to future meetings	Added to the work programme	June and September 2014
Minute 159 – Request for Carry Over of Funding for Public Weight Management Pilot Schemes	Outcomes of the project to be reported to the committee at 3, 6 and 12 months.	Added to Work Programme.	September 2014

CARE SERVICES PDS COMMITTEE WORK PROGRAMME 2013/14

Title	Notes
Health Scrutiny Sub-Committee- 9th July 2014 (4.30pm)	
Terms of reference for the Health Scrutiny Sub Committee (HSSC)	
HSSC Work Programme	
Urgent Care Pathway – PRUH Performance Update	Standing Item
Feedback form the Joint Six Borough Health Scrutiny Committee	
NHS Health checks Update on evaluation dn Diabetes project.	Update
Update on Urgent Care Centre	
Quality Accounts (Oxleas/Kings)	
Health and Wellbeing Board – 24th July 2014 (1.30pm)	
Care Services Policy Development and Scrutiny Committee - 24th September 2014	
Care Services Budget Monitoring Report 2014/15	Regular Status report
Capital Monitoring Q1 2014/15	Regular Status report
SCHS Contract Monitoring Activity Update Sept-Dec 2014	Info Briefing
Implications of the changes to the Youth Remand Framework	PDS Update
Day Nursery Provision Options for Future Delivery	
No Recourse to Public Funds	PDS Update
Outcomes of the Weight Management Project	
Bromley Safeguarding Adults Board (BSAB) Annual Report 2013/14	Info Briefing
Bromley Safeguarding Children’s Board Annual Report 2013/14	
Children’s Social Care R&R Strategy 2015	Pre-decision Scrutiny

Title	Notes
Care Bill Impact and Implementation	Pre-decision Scrutiny
Annual Report on the Youth Offending Team	Info Briefing
Annual Corporate Parenting report 2013/14	PDS Update
Health and Wellbeing Board – 2nd October 2014	
Care Services Policy Development and Scrutiny Committee - 11th November 2014	
Care Services Portfolio Plan Priorities Jun 14 – May 15	Regular Progress Update
Housing Services 2014/15 Priorities	Regular Progress Update
Care Services Portfolio Budget monitoring 2014/15	Regular Status report
Capital Monitoring 2014/15	Regular Status report
Welfare reform Update – Inc fraud Initiatives	PDS Update
Adult Social Care Local Account 2014	Info Briefing
Gateway review Client Information Systems	Pre-decision Scrutiny
Gateway review AIG Web Portal	Pre-decision Scrutiny
Health & Well Being Board – 27th November 2014	
Health Scrutiny Sub Committee – 3rd December 2014	
HSSC Work Programme	
Update from Kings on the PRUH Improvement Plan	
Feedback from the Joint six Boroughs Health Scrutiny committee	
Integrated Services Programme (BCF)	Update
Outcome of the Weight Management Pilot Programme	Update
Quality Monitoring of Care Homes 2014	
Quality Monitoring of Domiciliary Care Services 2014	

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Title	Notes
Quality Monitoring of Children's Social Care Services (Residential and Dom Care) 2014	
Education Outcomes for LBB Children in Care	
Care Service Portfolio Budget Monitoring 2014/15	Regular Status Report
Capital Monitoring 2014/15	Regular Status Report
ECHS Contract Activity Update Sept – December 2014	Info Briefing
Annual ECS debt Status Report	Regular Status Report
Health & Wellbeing Board – 29 th January 2015	
Joint Care Services & Education PDS	
Care Service PDS	
Draft Portfolio Plan Jun 2015 – May 2016	
Draft Housing Priorities 2015/16	
Care Services Portfolio Budget Monitoring 2014/15	Regular Status report
Capital monitoring 2014/15	Regular Status report
ECHS Contract Activity Update 2014/15	Info Briefing
Health & Wellbeing Board – 26 th march 2015	
Health Scrutiny Sub Committee – 15 th April 2015	
MISSC Work Programme	
Update from Kings on the PRUH Improvement Plan	
Feedback from the Joint six Boroughs Health Scrutiny committee	
Health and Wellbeing Board – 21 st may 2015	

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Report No.
CS14043

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre-Decision Scrutiny by the Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: CARE SERVICES PORTFOLIO PLAN PRIORITIES
JUNE 2014 - MAY 2015

Contact Officer: Angela Buchanan, Performance and Business Planning Manager
Tel: 020 8313 4199 E-mail: angela.buchanan@bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director of Education, Care & Health Services

Ward: All Wards

1. Reason for report

This report presents the PDS Committee with the most recent update on progress with the Care Services Portfolio Plan Priorities for 2013/14 and the draft Portfolio Plan Priorities for 2014/15 (Appendix A) for consideration and comment.

2. **RECOMMENDATIONS**

The PDS is asked to:-

- a) Note the progress made against the actions in the 2013/14 Portfolio Plan
- b) Comment on the draft Care Services Portfolio Plan for 2014/15

The Portfolio Holder is asked to-

- a) Agree the 2014/15 draft Care Services Portfolio Plan

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People Supporting Independence:
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Education, Care Services and Health department
 4. Total current budget for this head: £122.117m
 5. Source of funding: ECS Approved Revenue Budget 2013/14
-

Staff

1. Number of staff (current and additional): 794.44
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: None:
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): All residents of the borough
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

Draft priorities for the Care Services Portfolio Plan 2014/15

- 3.1 The draft 2014/15 Care Services Portfolio Plan develops the four key priorities established in 2013 aimed at 'supporting improved quality of life through encouraging high aspirations, maximising independence, promoting healthy lives and protecting the most vulnerable'.
- 3.2 These four priority outcomes remain aligned to the national areas covering housing, adults and children's social care, and reflect the Government's outcome frameworks for these services. They take account of the new vision for adult social care services as defined by the Care Bill 2013 in which fundamental reforms are proposed as to how the law on adult social care will work, prioritising wellbeing, highlighting the importance of prevention and postponement of the need of basic care and support, and putting people in control of their care and support.

Outcome 1: Ensuring the **health and wellbeing** of children, young people and their families, and enhancing quality of life for adults and older people with care and support needs

Outcome 2: Maximising **independence** and reducing the need for care and support

Outcome 3: Ensuring that people have a **positive experience** of care and support

Outcome 4: Ensuring children and young people are **safe within the community**, and adults and older people whose circumstances make them vulnerable are **protected from avoidable harm**

These Priority Outcomes are underpinned by supporting aims to promote the health and wellbeing, independence, and safety of service users, and ensure a positive experience of care and support.

Progress on the 2013/14 Care Services Portfolio Plan

- 3.3 Of the 44 actions to be progressed during the year, 41 have been achieved with 3 actions requiring more work in 2014/15. Where work continues in the 2014/15, this has been factored into the current plan.
- 3.3.1 In terms of direct impact for our adult and children social care service users, the highlights are:
- Prevented homelessness for more than 1,500 households
 - Supported over 20 pupils to become independent travellers opening up opportunities to participate in further and higher education, work experience/employment opportunities
 - Reduced the length of time for which children are subject to care proceedings by 18 weeks to 24 weeks
 - Supported 82% of our service users aged 65+ discharged from hospital with a reablement/rehabilitation package to remain in their own home 91 days after discharge
 - Worked in partnership through the ProMISE programme (Proactive Management of Integrated Services for the Elderly), to train 216 carers in the identification of Urinary Tract Infections (UTI). With 62 hospital admissions subsequently avoided.
 - Developed support plans for 50 service users who would ordinarily have been referred directly to a day centre in partnership with Vibrance (a not for profit organisation with expertise in self-directed support).

- Hosted the first adult and children's stakeholder conferences bringing together over 180 representatives of the voluntary sector, community groups, service users, carers and health professionals to shape business planning and priorities for the future
- Through the Virtual Service User Panel, directly reached 1,400 Adult Carers with the on line carers survey
- Consulted with over 250 young people and parents to develop the youth strategy
- Launched Phase 2 of the Local Offer accessible on line directory of services for children, families and young people with Special Educational Needs (SEN), receiving 5,880 page views

3.3.2 Areas that Remain a Challenge

- a) The aim to minimise the use of temporary accommodation for people who are homeless, has been the most significant challenge for the Care Services Portfolio. Despite acquiring an additional 143 housing units, and the innovative work at Bellegrove, it has not been possible to keep pace with the current level of homelessness and spiralling prices across London. The use of temporary accommodation remains above our aim of having fewer than 438 people in temporary accommodation, with 824 people in such accommodation at the end of March 2014. Members will be aware that this priority has been the subject of separate reports to Care Services PDS and regular progress reports will continue through the housing performance reports, and the budget monitoring. A full update on Housing Needs Priorities can be found on this agenda under item CS 14044.
- b) The numbers of nursing care placements has remained fairly constant during the year with average numbers being 10 FYE below the budget of 244 places. Although residential placements have also reduced during the year as a result of the new capacity at the Extra Care Housing schemes at Regency and Sutherland Courts, placements have been on average 22 FYE above budget of 309 places.
- c) Challenges remain to increase the number of in-house foster carers to a level that reflects the needs of all Bromley's children in care, including emergency, short-term and long-term placements, family and friends carers, children with disabilities and parent & child placements.

3.4 Key areas for the 2014/15 Portfolio will include:-

- Enhancing the service user offer to provide more choice and control
- Market testing service models to open up opportunities for integration and establish who is best placed to deliver services
- Strengthening the quality assurance and contract monitoring process through partnership working with the Clinical Commissioning Group (CCG)
- Supporting the transition of young people leaving care and moving into independent living, further/higher education and employment
- Improving permanency planning for Looked After Children
- Focusing on homelessness prevention by working in partnership and make best use of the supply and use of affordable housing
- Integrating into every aspect of Council life, the protection of the public's health, by tackling the causes of ill health, reducing inequalities, promoting health and health protection

3.5 Progress against Portfolio Priorities will be reported to the Care Services PDS at the half year stage. In addition many areas outlined above will also be reported to the PDS committee during the year as outlined on the PDS work programme.

4. POLICY IMPLICATIONS

4.1 The Plan reflects the priorities of the Care Services Portfolio.

5. FINANCIAL IMPLICATIONS

5.1 The four year financial forecast gives an overview of the key service and financial pressures facing the Council and identifies in detail the cost pressures facing Care Services

6. LEGAL IMPLICATIONS

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

Non-Applicable Sections:	Personnel Implications
Background Documents: (Access via Contact Officer)	<p>Care Services Portfolio Plan 2013/14 Care Services Portfolio Plan 2013/14</p> <p>Care Services Portfolio Plan 2013/14 Half Year Update Care Services Portfolio Plan 2013/14 Half Year Update</p> <p>Care Services Portfolio Plan 2013/14 Half Year Update Appendix 1</p>

The PDS Committee and Executive have received a number of reports on areas covered within this report; the table below provides more details:

PDS Number	Meeting Date	Agenda Item	Report Title
CS 13003 (Exec)	12th June 13	8	Adoption Grant Drawdown
CS 12101 (Exec)	12th June 13	9	Change of Management arrangements for Council owned LD homes
CS 13008	18th June 13	8b	Housing Services 2013/14 priorities
CS 13009	18th June 13	9	Tackling Troubled Families - Update
CS 13020	3rd September 13	7a	Annual Report Bromley Adoption Agency
CS 13021	3rd September 13	7b	Fostering statement of purpose

PDS Number	Meeting Date	Agenda Item	Report Title
CS 13022	3rd September 13	7c	Care Services Portfolio Budget Monitoring
CS 13028	3rd September 13	7e	Short Breaks for Children with Disabilities - Gateway Review
CS 13032 (Exec)	11th September 13	8	Tackling Troubled Families Grant Drawdown
CS 13043	29th October 13	7g	Care Services Portfolio Budget Monitoring
CS 13045	29th October 13	9	Extra Care Housing Strategy Update
CS 13038	20th November 13	7d	Welfare Reform Budget Pressures
CS13049 (Exec)	20th November 13	11	Impact of the Care Bill and Future of NHS Funding
CS 14004	22 nd January 14	7b	Housing Services Priorities - Mid Year Update Housing Services Priorities - Mid Year Update (1) Housing Services Priorities - Mid Year Update (2)
CS 14005	22 nd January 14	7c	Framework Agreement for Children with Disabilities Service
CS 14006	22 nd January 14	7d	Day Opportunities and Respite for Older People
CS 14002	22 nd January 14	8	Draft 2014/15 Budget Draft 2014/15 Budget (1)
CS 14001	22 nd January 14	9	Budget Monitoring Budget Monitoring (1)
CS 14008	22 nd January 14	13	Quality Monitoring of Domiciliary Care, Care Homes and Children's Placements Appendix 1 Appendix 2 Appendix 3 Appendix 4 Appendix 5
CS 14009	22 nd January 14	14	Update on SEN Pathfinder Project and Children and Families Bill Appendix 1
CS 14025	11 th March 14	7a	Budget Monitoring 2013/14 Appendix 1
CS 14031	11 th March 14	11	Tackling Troubled Families

DRAFT Care Services Portfolio Plan for 2014/15

↘ Encouraging high aspirations



↘ Maximising independence



↗ Promoting healthy lives

↗ Protecting the most vulnerable

Priority Outcome 1

Ensuring the health and wellbeing of children, young people and their families, and enhancing quality of life for adults and older people with care and support needs

Why is this a priority?

To enable:

- All children and young people to live in a safe environment
- Service users and carers to maintain a family and social life and contribute to community life

Outcome statements

- In Bromley, residents are offered effective choice and control over the services they receive to maintain independence
- Children, young people, adults and older people are encouraged to have happy and healthy lifestyles
 - Children and young people are supported to access opportunities for positive activities across the borough
 - People can maintain their independence and live their lives to the full, receiving high quality support when they need it
 - People seeking help from Care Services receive advice, guidance and services swiftly
 - People know the choices available to them locally, what they are entitled to and who to contact when they need help
 - People manage their own support so that it is delivered to meet their needs
 - People engage socially as much as they wish to avoid loneliness and isolation

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
1.1	Provide locally relevant information and advice about care and support need to enable choice and control	Publish a market position statement setting out the Council's commissioning intentions for Information, Advice and Guidance	Autumn 2014	Strategy Manager, Commissioning
		Support the Council to meet its new duties under the Children and Families Act 2014 by developing and implementing the Local Offer on the Bromley MyLife website	Autumn 2014	Planning and Development Manager
		Further extend the Locality Programme by utilising the Bromley MyLife website by mapping the support and networks offered by the local community within the Chislehurst area as part of the Integrated Community Team at The Willows Clinic	Autumn 2014	Planning and Development Manager
1.2	Have a diverse market in care and support services to offer choice and control to service users and their carers through a range of support at home and in the community	Support older people to regain independence following illness or loss of mobility through reablement, occupational therapy and intermediate care (working with health)	Ongoing	Head of Assessment and Care Management
		Increase the range of day activities available to older people, both independently and commissioned through the Council, enabling service users to exercise choice	Summer 2015	Commissioning Manager
		Establish the delivery model for Transport ensuring the most appropriate transport is available to meet service users' needs and opening up integration between adults and children's provision	Autumn 2015	Assistant Director, Commissioning
		Establish, through market testing, who is best placed to deliver the adult social care services currently delivered by the Council	Spring 2015	Strategy Manager, Commissioning

Priority Outcome 1 (continued)

Ensuring the health and wellbeing of children, young people and their families, and enhancing quality of life for adults and older people with care and support needs

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
1.2	Provide locally relevant information and advice about care and support need to enable choice and control	Work with the Clinical Commissioning Group to plan a more effective discharge process to avoid the use of care homes as an interim care arrangement	Autumn 2014	Head of Assessment and Care Planning
		Undertake a Gateway Review of the Bromley MyLife website to ensure that the Council is achieving value for money and that the website supports the Council to deliver its functions as efficiently and effectively as possible both now and in the future	Autumn 2014	Planning and Development Manager
1.3	Improve health outcomes for those with health needs	Support children with complex disabilities to remain within the family home and their local community through the provision of a range of high quality short breaks services ranging from after school activities to overnight care	Autumn 2014	Strategic Commissioner, Disabilities
		Increase the take up of health services (such as regular dental checks) for Looked After Children (LAC) through support from the dedicated LAC nurse	Summer 2015	Head of Care and Resources
		Improve prevention of Cardio-vascular disease through the diabetes prevention project and NHS Health checks evaluation	Summer 2015	Director of Public Health
1.4	Encourage children and young people to take responsibility for their actions and work with parents and carers to support them in taking parental responsibilities	Work with identified families (Tacking Troubled Families initiative) to improve employment, school attendance outcomes and reduce antisocial behaviour	March 2015 (Year 3 cohort)	Head of Referral and Assessment
		Develop viable alternatives to custody for young people held on remand through joint working between the Youth Offending Team, Targeted Youth Support programme, Children's Social Care and the Courts	Ongoing	Head of Bromley Youth Support Programme
		Plan and implement step down arrangements for young people, particularly Looked After Children, on leaving custody	Ongoing	Head of Bromley Youth Support Programme
		Support vulnerable young people and individuals to take responsibility of their sexual wellbeing through provision of information, advice and prevention methods including	Ongoing	Director of Public Health
	We will measure achievement by.....		Target	
		The number of people remaining in their own homes 91 days after hospital discharge with a reablement/rehabilitation service	90%	
		Children in Care with an up to date dental and medical check	95%	
		Number of page views on Bromley MyLife	125,000	
		<i>Placeholder.</i> Engagement on Market Position Statement	TBC	

Priority Outcome 2

Maximising Independence and reducing the need for care and support

Why is this a priority?

To enable:

- All children and young people to live happy and healthy lifestyles
- All children and young people to feel supported by their parents and carers

Outcome statements

- In Bromley, everybody has the opportunity to have optimum health throughout their life and proactively manage their health and care needs with support and information
- Vulnerable children and young people make a successful transition and achieve maximum independence when moving into adulthood
 - Children and young people in care are encouraged to have high aspirations for their future and are supported to achieve their maximum potential
 - People experiencing housing difficulties are assisted with advice and support aimed at maintaining or securing a home and avoiding crisis
 - When people become ill, recovery takes place in the most appropriate place, enabling people to regain their health, wellbeing and independence
 - Earlier diagnosis and intervention means that people are less dependent on intensive services

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
2.1	Support the transition of young people leaving care and moving into independent living, further/higher education and employment	Through targeted youth support, improve the participation of Children's Social Care services users, in particular Looked After Children and care leavers, in apprenticeships and work based training	Ongoing	Head of Bromley Youth Support Programme
		Support young disabled adults to travel independently through the continuation of a travel training programme	Spring 2015	Business and Planning Manager
2.2	Support service users to stay independent for as long as possible	Introduce an adult transport policy which focuses on what people are able to do and the resources they have available	Spring 2015	Business and Planning Manager
		Develop integrated pathways of care with Bromley Clinical Commissioning Group focusing on self management and support for carers	Autumn 2014	Strategy Manager, Commissioning
		Support people living with HIV to stay as independent as possible through peer support and peer mentoring	Ongoing	Director of Public Health
		Through the development of the Bromley MyLife website, reduce the level of initial telephone contacts to the Council	Summer 2015	Planning and Development Manager

Priority Outcome 2 (continued)

Maximising Independence and reducing the need for care and support

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
2.3	Focus on preventing homelessness by working in partnership to maximise and make best use of the supply and use of affordable housing	Maximise the level of prevention work seeking to minimise the potential for increased homelessness, with focus on preventing young people entering care	Ongoing	Assistant Director, Housing Needs
		With Housing Benefit, the DWP, partner landlords and social care, prepare for implementation of the Universal Credit element of the Welfare Reform Act, and minimise the impact of the Under Occupier and Benefit Cap reforms	Summer 2015	Assistant Director, Housing Needs
		Work with the Voluntary Sector to provide support to households to be affected by the Universal Credit element of the Welfare Reform Act	Ongoing	Assistant Director, Housing Needs
		Enhance communication with service users through:- - Tailoring information, advice and guidance to meet their needs - Streamlining the pre assessment information collation process, on the 'Myportal' on line housing advice module	Autumn 2014	Assistant Director, Housing Needs
		Review the criteria of the allocations scheme and housing register with particular regard to the 'Local Connection' element	Spring 2015	Assistant Director, Housing Needs
		Maximise access to alternative housing campaigns through - A revised publicity campaign to attract landlords - Working with developers to bring back into use empty residential and commercial premises as housing accommodation	Spring 2015	Assistant Director, Housing Needs
		Review access to short term supported lodging for young people to minimise placements in shared nightly paid accommodation	Spring 2015	Assistant Director, Housing Needs
		Work to acquire sufficient levels of decent quality, cost effective, nightly paid accommodation	Ongoing	Assistant Director, Housing Needs
		In partnership with Occupational Therapy, meet the needs of service users through effective use of the existing housing stock or, where new adaptations are required, giving consideration as to how modified properties could be used by future service users	Summer 2015	Assistant Director, Housing Needs

Priority Outcome 2 (continued)

Maximising Independence and reducing the need for care and support

Action Plan

	We will measure achievement by.....		Target
		Percentage of Young People – Care Leavers, – Young Offenders in Education, Employment and Training	75% 80%
		Number of households in Nightly Paid Accommodation (NPA)	<500
		Number of cases where positive action was successful in prevention or relieving homelessness	45%
		NHS Health checks evaluation against London Quality Standards	London Quality Standards
		Diabetes audit to provide baseline data	Baseline Data Audit
		<i>Placeholder.</i> Chanel shift measure	TBC
		<i>Placeholder.</i> Healthcheck of MyLife	TBC

Priority Outcome 3

Ensuring that people have a positive experience of care and support

Why is this a priority?

To enable:

- Residents to be offered effective choice and control for the services they receive to maintain their independence
- People to know what choices are available to them locally, what they are entitled to, and who to contact for help

Outcome statements

In Bromley, care service users and their carers are satisfied with their experience of care and support services:

- People respect the dignity of the individual and ensure support is sensitive to each individual's circumstances
- Child carers, parents and carers are supported in their parenting and caring roles
- Carers can balance their caring roles with their desired quality of life and feel that they are respected as equal partners throughout the care process
- Service user views and experiences are gathered to help inform service developments, and concerns are responded to quickly and effectively
- Care service standards are regularly reviewed to ensure they deliver a quality service and continue to maintain service users' independence

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
3.1	Ensure that vulnerable children and families are identified and supported at the earliest possible stage	Reduce the need for statutory intervention by providing early support through the Bromley's Children Project services ranging from information, advice and guidance through to targeted parenting courses	Ongoing	Head of Assessment and Referral,
		Support young adults to develop life skills and maximise achievement potential through programmes delivered by the Bromley Youth Support programme/Targeted Youth programme, and the mentoring service provided by the Bromley Education Business Partnership	Ongoing	Head of Bromley Youth Support Programme
3.2	Ensure stable placements for children and young people where foster care is identified in the plan	Actively recruit 20 new foster carers to meet the needs of older children, sibling groups and those with complex needs	Summer 2015	Head of Care and Resources
		Develop a range of support, including support groups and training, to ensure foster carers are able to meet the needs of children and young people with complex and challenging behaviour	Summer 2015	Head of Care and Resources
		Through the MyLife web site, explore a dedicated foster carer portal to allow direct communication between social care and foster carers	Autumn 2014	Head of Care and Resources
		Support young people between the ages of 18 and 21, and their former foster carers to maintain a 'staying put' arrangement	Summer 2015	Head of Care and Resources
		Ensure value for money and the quality of commissioned Looked After Placements through a programme of continual review	Ongoing	Group Manager, Commissioning
3.3	Better identify and support carers living in Bromley by:	Ensuring that the voice of service users and carers is routinely sought (developing/changing services) and that when we receive feedback, we take action on it	Ongoing	Assistant Director, Commissioning Head of Safeguarding, Quality Assurance
		Publish a new Carers Strategy which addresses the requirements of the Care Bill	Autumn 2014	Strategy Manager, Commissioning

Priority Outcome 3 (continued)

Ensuring that people have a positive experience of care and support

Action Plan				
No.	We aim to...	Actions	Deadline	Lead Officer
3.4	Promote excellent customer service for those who experience our services	Implement Plans for integrated health and social care assessment services	Autumn 2014	Strategy Manager, Commissioning
		Ensure that effective community engagement takes place (particularly relating to health services), through Healthwatch	Autumn 2014	Strategic Manager, Procurement and Contracts
		Encourage customers to share their experiences of our services through compliments and complaints. Where things go wrong, use the lessons learnt to improve services delivery	Ongoing	Quality Assurance Manager
	We will measure achievement by.....		Target	
		Overall satisfaction of adults in the Personal Social Services Survey	TBC	
		Service users and carers are able to access an assessment in a timely manner	95%	
		Number of Education, Health and Care plans	TBC	
		Number (%) of Stage 1 ECHS complaints responded to within timescale	70%	
		Number of new Foster Carers	24	
		Number of new approved Adopters	15	

Priority Outcome 4

Ensuring Children and young people are safe within the community, and Adults and Older People whose circumstances make them vulnerable are protected from avoidable harm

Why is this a priority?

To enable:

- Support and services to be provided to adults at risk who are experiencing abuse, neglect and exploitation
- All children and young people to live in a safe environment

Outcome statements

In Bromley, everyone enjoys physical safety and feels secure:

- Children and young people are safeguarded and protected from harm, and are kept safe from bullying or crime
- People are free from physical and emotional abuse, harassment, neglect and self harm
- Instances of abuse of vulnerable adults are investigated promptly and effectively
- People are protected as far as possible from avoidable deaths, disease and injuries

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
4.1	Focus on improving outcomes for vulnerable children in need of care and protection	Work with partner agencies and the Courts to improve early decision making for children subject to care proceedings and conclude these proceedings within 26 weeks	Summer 2015	Head of Safeguarding and Care Planning
		Seek to increase the number of adoptive parents, special guardianship and kinship carers to meet the needs of older children, sibling groups and those with complex needs unable to live with their birth families	Autumn 2014	Head of Care and Resources
		Provide an integrated pathway for children and young people, and their families, ensuring a smooth transition to the new Special Educational Needs and Disabilities framework	Spring 2015	Strategic Commissioner - Disabilities
4.2	Focus on the prevention of abuse of vulnerable children and adults through the work of the Safeguarding Board and engaging with Partner Agencies	Through the work of the Bromley Safeguarding Children Board and engaging with partner agencies, take steps to implement strategies, policies and practice to target and safeguard vulnerable children	Spring 2015	Head of Safeguarding , Quality Assurance
		Through the work of the Safeguarding Board, develop shared strategies for safeguarding and report to local communities on progress	Summer 2015	Quality Assurance Manager
		In partnership with Public Health, promote emotional health and wellbeing in young people through the self harm prevention strategy	Summer 2015	Head of Safeguarding, Quality Assurance Director of Public Health
		In partnership with the Clinical Commissioning Group, enhance the review process to strengthen the quality assurance of services provided to individuals	Summer 2015	Quality Assurance Manager

Priority Outcome 4 (continued)

Ensuring Children and young people are safe within the community, and Adults and Older People whose circumstances make them vulnerable are protected from avoidable harm

Action Plan

No.	We aim to...	Actions	Deadline	Lead Officer
4.3	Continue to improve the delivery of services and reliability of contractors through Quality Assurance and Contract Monitoring	Through joint working with health partners, improve standards of nursing care to reduce incidence and escalation of avoidable health conditions	Summer 2015	Quality Assurance Manager
		Improve, through partnership working, the quality of training delivered to care staff and supervisors	Summer 2015	Strategic Manager, Procurement and Contracts
		Seek to improve the quality of life for service users through ensuring that care homes are planning for individual needs and delivering appropriately tailored services including consideration of activities	Ongoing	Strategic Manager, Procurement and Contracts
	We will measure achievement by:-		Target	
		The average time taken (days) between child entering care and moving in with its adoptive family	487 days	
		Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family	121 days	
		Percentage of children who wait less than 20 months between entering care and moving in with their adoptive family	75%	
		Percentage of domiciliary care agencies and care homes reaching 100% compliance with the Council's Quality Assurance process	TBC	

Report No.
CS14045

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

**For Pre-Decision Scrutiny by the Care Services PDS
Committee on**

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: FINAL OUTTURN REPORT 2013/14

Contact Officer: David Bradshaw, Head of Education, Care and Health Services Finance
Tel: 020 8313 4807 E-mail: David.Bradshaw@bromley.gov.uk

Chief Officer: Executive Director of Education, Care and Health Services

Ward: (All Wards);

1. Reason for report

1.1 This report provides the final position for 2013/14.

2. RECOMMENDATION(S)

2.1 The PDS Committee are requested to:

(i) note that there was an underspend of £149,000 on controllable expenditure at the end of 2013/14 and consider any issues arising from it;

(ii) note that the Executive on the 10th June 2014 have agreed the net carry forwards as detailed in Appendix 2; and

(iii) refer the report to the Portfolio Holder for approval.

Corporate Policy

1. Policy Status: Not Applicable
 2. BBB Priority: Children and Young People
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Care Services Portfolio
 4. Total current budget for this head: £119.622m
 5. Source of funding: Care Services Approved Budget
-

Staff

1. Number of staff (current and additional): 916.15 Full time equivalent
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Statutory Requirement
 2. Call-in: Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The 2013/14 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? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 This report provides an update of the final budget position for the Care Services Portfolio PDS Committee, which is broken down in detail in Appendix 1, along with explanatory notes.
- 3.2 The final outturn for the “controllable” element of the Care Services budget in 2013/14 is an underspend of £149,000 compared to the last reported figure of £27,000 underspent which was based on activity at the end of January 2014.

WINTER PRESSURES/URGENT CARE

- 3.3 Winter Pressure issues have been reported to previous Care Services Portfolio committees. The net position at the end of March 2014 was a cost to Bromley of £55k. This has been absorbed into the overall monitoring position and therefore there will be no requirement for any drawdown of funding. Details of the expenditure are contained within Table one.

Table One

<u>WINTER PRESSURES/URGENT CARE</u>	<u>£'000</u>
Staffing	90
Senior Care Manager	7
Community Equipment	185
Emergency Placements	54
Domiciliary Care	4
Total	<u>340</u>
Less funding from the CCG	-285
Net Amount	<u>55</u>

CARRY FORWARDS

- 3.4 On the 10th June 2014 the Executive were asked to approve a number of carry forward requests relating to either unspent grant income, or delays in expenditure where cost pressures will follow through into 2014/15. Appendix 2 provides a detailed breakdown of all of the carry forward requests. As you will see from Appendix 2 the carry forwards included in section 1 will have repayment implications if not approved, those in section 2 relate to grants which will not have to be repaid if not agreed but will impact on service delivery in 2014/15. Future reports to the Portfolio Holder will be required to approve their release.

PUBLIC HEALTH

- 3.5 Public Health underspent in 2013/14 by £769k. As per the terms of the grant funding this amount has been transferred to a Public Health Reserve which can be used in 2014/15 for Public Health activities

FULL YEAR EFFECTS MOVING INTO 2014/15

- 3.6 Appendix 3 provides a breakdown of any full year implications arising from the final 2013/14 outturn. It should be noted that there are considerable pressures across the Portfolio of over £1.2m in 2014/15 that will need to be managed and contained within existing budgets. The breakdown is contained within table two below.
- 3.7 The above does not include any savings targets for 2014/15 and therefore the overspend in 2014/15 may be higher than the figure in table two. The budget monitoring paper elsewhere on this agenda gives more detail on the ongoing positions

Table two

FULL YEAR EFFECT PRESSURES FOR 2014/15

	<u>£'000</u>
Residential and Domiciliary Care - Older People	398
Operational Housing	237
Children's Social Care Placements	282
No Recourse to Public Funds	205
Mental Health and Learning Disabilities	91
	<u>1,213</u>

- 3.8 Appendix 4 provides a detailed reconciliation of the Original 2013/14 budget to the Latest Approved 2013/14 budget.

4. POLICY IMPLICATIONS

- 4.1 The Resources Portfolio Plan includes the aim of effective monitoring and control of expenditure within budget and includes the target that each service department will spend within its own budget.
- 4.2 Bromley's Best Value Performance Plan "Making a Difference" refers to the Council's intention to remain amongst the lowest Council Tax levels in Outer London and the importance of greater focus on priorities.
- 4.3 The four year financial forecast report highlights the financial pressures facing the Council. It remains imperative that strict budgetary control continues to be exercised in 2014/15 to minimise the risk of compounding financial pressures in future years.
- 4.4 Chief Officers and Departmental Heads of Finance are continuing to place emphasis on the need for strict compliance with the budgetary control and monitoring arrangements.

5. FINANCIAL IMPLICATIONS

- 5.1 The financial implications are contained within the body of the report. A detailed breakdown of the projected outturn by service area is shown in Appendix 1(a) with explanatory notes in Appendix 1 (b).

Non-Applicable Sections:	Legal Personnel
Background Documents: (Access via Contact Officer)	2013/14 Budget files in ECHS Finance Section

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2012/13 Actuals £'000	Division Service Areas	2013/14 Original Budget £'000	2013/14 Latest Approved £'000	2013/14 Outturn £'000	Variation £'000	Notes	Variation Last Reported £'000	Full Year Effect £'000
EDUCATION, CARE & HEALTH SERVICES DEPARTMENT								
Adult Social Care								
36	AIDS-HIV Service	121	46	18	Cr 28		Cr 28	0
31,979	Assessment and Care Management (exc. CE below) Community Equipment	28,237 768	28,350 768	30,176 750	Cr 1,826 18	1	1,410 0	398
4,203	Direct Services	3,492	3,985	3,897	Cr 88	2	19	0
2,621	Learning Disabilities Care Management	2,520	3,011	2,868	Cr 143	3	Cr 60	0
1,853	Learning Disabilities Day and Short Breaks Service	1,889	1,976	1,694	Cr 282	4	Cr 212	0
1,184	Learning Disabilities Housing & Support	1,160	1,108	987	Cr 121	5	Cr 91	0
41,876		38,187	39,244	40,390	1,146		1,038	398
Operational Housing								
3,773	Housing Needs	3,150	4,507	4,571	64	6	190	237
Cr 1	Enabling Activities	Cr 4	Cr 4	Cr 1	3		3	0
Cr 1,815	Housing Benefits	Cr 964	Cr 904	Cr 778	126		0	0
1,957		2,182	3,599	3,792	193		193	237
Strategic and Business Support Services								
2,077	Performance & Information	2,799	2,304	2,059	Cr 245	} 7	Cr 200	0
194	Quality Assurance	231	241	217	Cr 24		Cr 23	0
7	Transforming Social Care	0	0	0	0		0	0
2,278		3,030	2,545	2,276	Cr 269		Cr 223	0
Children's Social Care								
9,802	Care and Resources - Youth on remand	13,962 0	13,965 195	14,218 195	253 0	} 8	217 0	253 0
1,787	Safeguarding and Quality Assurance	1,353	1,413	1,544	131		0	0
5,527	Safeguarding and Care Planning	3,238	3,478	3,373	Cr 105		Cr 38	0
4,024	Referral and Assessment	3,123	3,181	3,615	434		381	205
837	Bromley Youth Support Programme	913	926	765	Cr 161		Cr 122	0
4,209	Children's Disability Service	4,629	4,644	4,025	Cr 619		Cr 266	29
26,186		27,218	27,802	27,735	Cr 67		172	487
Commissioning								
3,819	Commissioning	3,696	3,267	3,311	44	9	160	0
14,056	Learning Disabilities	24,391	22,926	22,327	Cr 599	10	Cr 700	11
4,618	Mental Health Services	4,924	4,932	4,776	Cr 156	11	Cr 259	110
3,096	Supporting People	3,100	3,100	2,843	Cr 257	12	Cr 210	Cr 30
163	Drugs and Alcohol	237	237	0	Cr 237	13	Cr 237	0
0	PCT Funding (Social Care & Health)	0	0	0	0		0	0
25,752		36,348	34,462	33,257	Cr 1,205		Cr 1,246	91
Public Health								
0	Public Health	11,000	12,231	12,229	Cr 2	14	Cr 578	0
0	Public Health - Grant Income	Cr 11,000	Cr 12,601	Cr 12,601	0		578	0
0		0	Cr 370	Cr 372	Cr 2		0	0
98,049	TOTAL CONTROLLABLE FOR ECHS DEPARTMENT	106,965	107,282	107,078	Cr 204		Cr 66	1,213
ENVIRONMENT AND COMMUNITY SERVICES DEPARTMENT								
Environmental Services - Housing								
179	Housing Improvement	109	117	179	62	15	30	0
243	Housing Enforcement	254	203	196	-7		0	0
422	TOTAL CONTROLLABLE FOR E & CS DEPT	363	320	375	55		30	0
98,471	TOTAL CONTROLLABLE BUDGET FOR THE PORTFOLIO	107,328	107,602	107,453	Cr 149		Cr 36	1,213
3,436	TOTAL NON CONTROLLABLE	3,597	2,092	2,092	0		9	0
9,781	TOTAL EXCLUDED RECHARGES	9,828	9,928	9,928	0		0	0
111,688	CARE SERVICES PORTFOLIO TOTAL	120,753	119,622	119,473	Cr 149		Cr 27	1,213

2012/13 Actuals £'000	Division Service Areas	2013/14 Original Budget £'000	2013/14 Latest Approved £'000	2013/14 Projection £'000	Variation £'000	Notes	Variation Last Reported £'000	Full Year Effect £'000
MEMORANDUM ITEMS								
	Invest to Save projects: Savings							
	Dementia Investment Plan	Cr 250	Cr 250	Cr 220	30		135	
	PD Investment Plan	Cr 250	Cr 250	Cr 34	216		170	
	LD Investment Plan (re Younger Adults)	Cr 75	Cr 75	0	75		75	
	Sub Total Invest to Save projects	Cr 575	Cr 575	Cr 254	321		380	0
	Trading Accounts							
	Trading Account - Performance & Research	0	0	Cr 33	Cr 33		Cr 30	0
	Sub Total Trading Accounts	0	0	Cr 33	Cr 33		Cr 30	0

REASONS FOR VARIATIONS**1. Assessment & Care Management - Dr £1,808k**

	<u>Current</u> <u>Variation</u>	<u>Last reported</u> <u>Variation</u>	<u>Change</u>
	£'000	£'000	£'000
The variation can be analysed as follows:-			
a) Residential/Nursing care and respite for older people	765	335	430
b) Extra Care Housing (ECH)	320	335	(15)
c) Domiciliary care & direct payments for older people	761	752	9
d) Residential and domiciliary care for people with physical disabilities	31	(1)	32
e) Community Equipment Service	(18)	0	(18)
f) Staffing and SLA's	(51)	(11)	(40)
	1,808	1,410	398

An invest to save proposal was agreed at Executive on 7 September 2011 relating to dementia. Savings from this were reflected in the budgets for 2012/13 (£100k) and 2013/14 (£150k), bringing the total saving required on older peoples budgets to £250k. Savings of £220k have been calculated as achieved for the year, mainly as a result of cost avoidance, ie keeping clients in their own homes rather than having to place them in nursing care.

- a) The numbers of nursing care placements has remained fairly constant during the year with average numbers being 10 fyes below the budget of 244 places . Although residential placements have also reduced during the year, as a result of the new capacity at the ECH schemes at Regency and Sutherland Courts, placements have been on average 22 fye's above budget of 309 places. An increase in debts unlikely to be recovered as well as those awaiting writeoffs has also required an increase in the contribution to the reserve for bad debts.
- b) The budgets for the new Extra Care Housing schemes at Regency Court and Sutherland Court have outturned with an overspend of £320k for the year. A combination of void units and additional care hours above those budgeted for have contributed to this overspend.
- c) Domiciliary care and direct payments have outturned slightly higher than predicted, with a final overspend of £761k. The policy of keeping service users within a community setting rather than placing them in a home has reduced the reliance on higher cost residential placements , but has increased the pressure on the community budgets.

An invest to save proposal was agreed at Executive on 19 October 2011 relating to services for people with physical disabilities. Savings from this were reflected in the budgets for 2012/13 (£100k) and 2013/14 (£150k), bringing the total saving required to £250k. For 2013/14 actual savings of only £34k were acheived

- d) Services for clients with physical disabilities has outturned with an overspend of £31k. Placements overspent by £99k and domiciliary care underspent by £68k.
- e) The budget for the Community Equipment Service run jointly with Bromley CCG underspent by £18k . During the year management action was taken to reduce the costs of the service which were projected to be substantially in excess of the budget. Discusstions with Bromley CCG resulted in an additional contribution from them of £400k and a further £185k was allocated by them from winter pressures funding.
- f) Other budgets within Assessment & Care Management have underspent in total by £51k, staffing accounted for £11k of this, and SLA's for the majority of the balance.

Winter Pressures

During 2013/14, Bromley CCG contributed £285k towards the additional costs of funding services during the 'winter pressures' period. Of this amount £185k was allocated to the Community Equipment budget and £100k to provide nursing placements and domiciliary care . Actual expenditure for community equipment budget overall outturned with a small underspend. The nursing/domiciliary care budget spend was £58k. In addition staffing costs totalled £98k, but this amount was able to be contained within the overall assessment and care management staffing budgets. The overall gross expenditure of £340k is offset by the available grant of £285k. The net position of £55k was found within existing resources

2. Direct Services - Cr £88k

- a) Extra Care Housing - Dr £127k

There has been a significant pressure on the in-house ECH budgets during the year, mainly due to the need to provide additional support to some service users with mental health / dementia needs. There has also been an increase in the number of flats being used as 'step down' facilities by care management, resulting in subsequent loss of income (as this is not a chargeable service).

- b) Transport Service- Cr £195k
The budget for the transport service has underspent significantly, with staffing underspent by £79k and running costs by £116k
- c) Reablement / CARTS - Cr £41k
The underspend in this services relates to staffing.
- d) Carelink - Dr £21k
The overspend in this services relates mainly to staffing (£15k) and underachievement of income (£4k).

3. Learning Disabilities Care Management - Cr £143k

The underspend relates to domiciliary care and direct payment costs (£117k) and staffing costs (£26k)

4. Learning Disabilities Day and Short Breaks Service - Cr £282k

The day care and short breaks service budgets have underspent by £282k this year, after budget savings of £75k have been taken into account. This has been achieved by the reorganisation of the management of day services and the relocation of PCT staff formally working at the Bassetts Day Centre to the Astley Centre resulting in better utilisation of those staff and ongoing vacancies in the service. The opening of the new short breaks service at Widmore Road has also achieved staff savings with the merging of the 2 former units onto the one site.

5. Learning Disabilities Housing and Support - Cr £121k

The underspend in the service mainly relates to vacant posts.

6. Operational Housing - Dr £193k

The 2013/14 budget now includes the £1m that had been held in the central contingency for the impact of welfare reform. The overspend takes this into account, i.e. it would have been higher if this funding hadn't been drawn down.

The number of B&B placements has increased at a significantly higher rate than in 2013/14 than in 2012/13. The net average increase in 2012/13 was 6 per month but the pattern in 2013/14 indicates an average monthly increase of 15; this is partly due to the impact of welfare reform. Numbers appear to have reduced in the final quarter of this financial year resulting in a balanced budget for B&B placements, which in turn has resulted in a return to central contingency of £129k of the original £1m.

The various invest to save initiatives have helped to reduce cost pressures and this is reflected in the figures. This includes the savings arising from Bellegrove (£86k in 2013/14 and £297k in a full year). Officers are currently modelling different scenarios to quantify the effect of further possible initiatives and also the most appropriate deployment of existing initiatives to maximise the financial benefit.

Increases in client numbers and rising unit costs are being experienced across all London boroughs. It is the result of the pressures of rent and mortgage arrears combined with welfare reform and a reduction in the number of properties available for temporary accommodation. There are high levels of competition and there is evidence of 'out-bidding' between London boroughs to secure properties. This has contributed towards the high cost of nightly paid accommodation.

The full year effect on temporary accommodation is currently anticipated to be a pressure of £237k in 2014/15 (this figure is net of the FYE savings from Bellegrove). However, this only takes account of projected activity to the end of March 2014, net of assumptions on savings arising from approved invest to save initiatives, and it does not include any projected further growth in numbers beyond that point.

Other variations within Housing Needs include an underspend on staffing (a result of a delay in finalising a restructure and continued difficulties / delays in recruitment), an increase in bad debt provision, funding the Bellegrove invest to save costs and the use of grants.

The £126k relates to increases in the bad debt provision due to the impact of changes of the Universal Credit

7. Strategic & Business Support Services - Cr £269k

The underspend on Strategic & Business Support Services relates mainly to: staffing (Cr £133k - vacant posts and reduced hours); overachievement of trading account income budget (Cr £33k); below budget spend on staff advertising (Cr £26k) and various other underspends on departmental general running expenses budgets.

8. Children's Social Care - Cr £67k

The main areas of under / overspending are:

Placements - Cr £18k

The children's placement budget has outturned with a minor underspend of £18k. This includes provision for possible additional payments to kinship carers as a result of the Tower Hamlets judgement (and Bromley having to pay family related carers at the same rate as unrelated carers) as well as possible additional costs in relation to adoption allowances.

Youth on Remand - Dr £0k

The LASPO Act 2012 paved the way for the devolution of under-18 secure remand budgets to local authorities from April 2013. The Youth Justice Board will continue to commission custodial places and will decide where to place those whom the court remands securely, but will invoice the local authorities for the cost. In addition where children are remanded securely they will all become looked after. Bromley's grant allocation for 2013-14 is £74k, and an amount was also set aside in the contingency of £500k for unfunded pressures. This sum was drawdown during the year, and the outturn shows that £195k of this allocation was spent. The balance of £305k has been returned to the contingency for future years.

Leaving Care Clients and UASC- Dr £308k

The budget for leaving care clients accommodation costs overspent by £391k net of housing benefits during the year. This included an amount set aside to cover the write off of debts no longer considered recoverable.

Offsetting this was income received in relation to Unaccompanied Asylum Seeking Children, which was higher than budgeted for.

No Recourse to Public Funds - Dr £434k

The cost to Bromley for people with no recourse to public funding has significantly exceeded the budget established for these costs, with £539k spent against a budget of £105k. The budget remains volatile with LBB having no influence on costs and will need to be monitored closely during 2014-15. Budgets have been reallocated for 2014-15, with an additional £260k being allocated here.

Bromley Youth Support Programme - Cr £161k

The underspend relates to staff vacancies in the Youth offending team.

Other miscellaneous budgets - Cr £11k

Other budgets within Children's Social Care have a net underspend of £11k, in particular an SLA with an external provider has not been renewed this year, resulting in an underspend of £38k.

Children's Disability Services - Cr £619k

	Projected Variations £'000
Short Breaks	Cr 340
Children's Disability Team	Cr 279
Total Children's Disability Services	Cr 619

The children's disability placement budget has underspent by £279k during the year. It had been expected that there would be new placements having to be made during the year, however these materialised later than assumed, resulting in a higher underspend than originally projected.

The short breaks service underspent by £340k, mainly due to the cessation of the floating outreach service in July and reduced costs of some SLA's as well as an underspend on the contract for provision of services at the Hollybank short breaks service (£32k)

9. Commissioning - Dr £44k

The Commissioning service area includes budgets for Carers, Taxicard and various contracts and SLAs as well as staffing and associated budgets for the ECHS Department Commissioning Division.

The overspend arises mainly from the delay in the achievement in 2013/14 of the budgeted savings from outsourcing reablement (£250k) and market testing extra care housing services (£100k) which were dependent on Commissioning activity.

This is largely mitigated by underspends on other areas within Commissioning including: Commissioning Division staffing (Cr £158k), Carers (Cr £30k), contracts, including the direct payments and ICAS contracts (Cr £59k) and various other underspend on running expenses budgets.

10. Learning Disabilities Services - Cr £599k

Budgets for learning disabilities placements (including supported living and shared lives) and SLAs underspent by £599k in 2013/14. The savings arise mainly from commissioning cost efficient placements and attrition.

The general situation regarding CCG Continuing Healthcare funding is currently volatile and there are risks relating to funding for LD clients. Typically these tend to be high cost clients so the financial risk is significant. Assumptions have been made on the position for the 2013/14 accounts but this may change as the situation progresses.

11. Mental Health Services - Cr £156k

The underspend arises partly from the full year effect of client moves during 2012/13 which resulted in more cost effective placements, from increased use of flexible support rather than residential placements and from containing annual contract price increases to providers. Some of the underspend relating to restricting price increases has been attributed to the 2013/14 budget saving for commissioning contract efficiencies.

12. Supporting People - Cr £257k

The underspend of £256k on Supporting People budgets is in addition to the savings required to achieve the savings targets built in to the 2013/14 budget (further £1m over and above 2012/13).

The underspend relates mainly to savings arising from the full year effect of the tendering of mental health flexible support services, from limiting inflationary increases paid to providers and from re-tendering / extending contracts in 2013/14 at a reduced cost.

13. Drugs & Alcohol - Cr £237k

Expenditure previously charged to Drugs & Alcohol budgets has been funded from Public Health substance misuse budgets in 2013/14.

14. Public Health - Cr £2k

The £2k relates to a variation in the non-controllable budgets which are shown elsewhere on the table. The Public Health grant underspent by £769k, and this amount has been transferred to the Public Health Reserve. Of this amount, the Executive on 12th February was asked to approve a carry forward of £98k for funding for weight management pilot schemes in 2014/15. The balance of the underspend relates to staffing costs of £329k due to vacancies during the year, and £338k in relation to Smoking and Tobacco services either not renewed during the year or due to underactivity on the Bromley Healthcare contract.

15. ENVIRONMENT AND COMMUNITY SERVICES DEPARTMENT - Housing Improvement - Dr £62k

There is a shortfall within renovation grant agency fee income of £65k. This is due to reduced activity on capital schemes which has had a corresponding effect on the fees earned. This is partly offset by other minor variations.

Directors Comments

The previous Report to PDS detailed the particular in-year pressures staff have had to manage. These are detailed elsewhere in the Finance comments but include more, and more complex, presentations to care managers than was planned for at budget setting, the most significant pressures we have ever seen by our Operational Housing team, and continuing pressures from those with no recourse to public funds.

This made it necessary to draw-down planned contingencies but, in addition, a further £1m of in-year pressures required managing and as can be seen from the full year effects predicted for 2014/15, these continue into the new financial year. Analysis of the past year indicates that the complexity of those entering our extra care housing schemes are considerably greater than the modelling considered, with more support than was envisaged. It is now clear that the modelling underpinning the schemes is not being seen in practice.

Our invest to save programmes showed mixed fortunes, some very effective such as dementia, but the physical difficulties (PD) much less so. In this case as it proved difficult to recruit to the posts and so was very slow to get underway, adding to the pressures on the budget.

The continuing troubles of the Princess Royal University Hospital (PRUH) have occupied a great deal of senior staff time this year with over £340,000 of additional costs over winter. These were supported, in part, by urgent care monies from the NHS but continue to put pressure on our budgets well after the end of winter!

Commissioning has continued to drive down the costs of placements across both adults and children and has made a major contribution to savings both planned and in-year. However, we are finding significant resistance from suppliers who increasingly require that we meet in full their pressures on operating costs. It is likely, then, we will see pressures on this budget in the coming year. However, outstanding work was done across a range of services working in partnership with care managers and children's staff to match packages very precisely to needs.

Children's Social Care has done extraordinarily well in containing pressures in a year when we saw a major transfer of responsibilities for children on remand move from central to local government but with only a fraction of the funding needed to manage a programme over which we have no control. However, just as we saw more clients with more complex needs, entering adult social care than predicted, giving very significant pressures on budgets, we saw fewer children with disabilities requiring packages, but also we were able to reduce costs. We are not hopeful that we will see the same, low numbers next year.

The full integration of public health into the directorate has allowed some rationalisation of spend and this will continue into 2014/15.

Finally, Housing staff are to be commended for their work in an extraordinarily challenging year. PDS will be aware of the use of contingencies in 2013/14 and the pressures these reflected continue into the new financial year. Once again, we are looking at ways of ameliorating them: the Bellegrove scheme would appear to have been particularly successful, for example. Nonetheless, contingencies once again have been set aside and it seems likely these will prove essential in supporting the budget.

I am grateful for the support of colleagues both within the directorate and across the Council for the much hard work undertaken this year to return the surplus in the most difficult of circumstances. This has included developing new ways of procuring packages, particularly for clients with learning disabilities, and more professional relationships with our health partners which has resulted in a significant number of continuing health care assessments finding need for the NHS to contribute to our costs. This relationship has also allowed us to address the historic issue with the community equipment budget that, after predicting a significant overspend earlier in the year, actually declared a small operating surplus. We have also caught-up on our client reviews in adult social care which had fallen several months behind at the end of the last financial year, meaning that packages match well individual needs and provide the best possible value for money for the council tax payer.

Waiver of Financial Regulations:

Since the last report to the Executive, waivers were approved as follows:

(a) There were 23 contract waivers agreed for the continuation of a current contracts of less than £50k each and 5 contract waivers agreed for the continuation of a current contracts of more than £50k each.

(b) There were 8 waivers agreed for placements over £50k in Adult Social Care.

Virements Approved to date under Director's Delegated Powers

Details of virements actioned by Chief Officers under delegated authority under the Financial Regulations "Scheme of Virement" are included in financial monitoring reports to the Portfolio Holder. Since the last report to the Executive, no virements have been actioned.

Care Services Portfolio Carry Forward Requests

Description	Carry Forward Request £	Reason for Carry Forward
1. Grants with Condition of Repayment Attached		
Social Care funding via the CCG under s256 Agreements:		
<i>Funding drawdown in to ECHS budget:</i>		
Expenditure:		
Invest to Save - Dementia	231,870	In 2010/11, 2011/12 and 2012/13 the Department of Health allocated funds for social care services which also supported the NHS. This funding was transferred to Bromley from the PCT under s256 agreements. A number of investment plans were approved by the Executive and drawn down in to the ECHS budget. Spending on some of these schemes has been low, due to a combination of delays in implementation, commissioning the work in a more cost effective way and absorbing some costs in existing budgets. There is a report elsewhere on this agenda referring to the future plans for this funding and returning some funds (£352k) to the central contingency. If the funding is not spent on agreed priorities there is a right of repayment.
Invest to Save - PD	485,140	
Invest to Save - Maximising Independence	123,910	
Invest to Save - Older People Day Opportunities Year 2	264,390	On 6th February 2013 the Executive agreed the Older People Day Opportunities and Respite Care Invest to Save scheme. The report set out that £264k would be required in 2014/15 to ensure delivery of planned savings and it is therefore requested that this sum is carried forward. If the funding is not spent on agreed priorities there is a right of repayment.
Care Bill / Adult Social Care Gateway Review	248,680	Funding totalling £266k was drawn down from the contingency during 2013/14 to enable detailed financial and activity modelling of the implications of the Care Bill. The report to the Executive on 20th November 2013 referred to the funding being spent from December 2013 over the course of approximately 12 months and it is therefore requested to carry forward £249k for spending in the 2014/15 financial year. If the funding is not spent on agreed priorities there is a right of repayment.
Invest to Contain - Children's Social Care Year 3	24,000	The Children's Social Care Invest to Contain proposal was reported to the Executive on 20th June 2012 and required non-recurrent funding to reduce ongoing cost pressures. The financial modelling in the report set out that £24k would be required in 2014/15, the third and final year of the investment and it is therefore requested that this sum is carried forward to be available in 2014/15. If the funding is not spent on agreed priorities there is a right of repayment.
Public Health - S256 - Underspend of PH by Bromley PCT in 2012/13	43,920	Bromley PCT underspent their Public Health funding in 2012/13. A Section 256 agreement was set up with LBB to transfer funds to be used to support Public Health Programmes. It is being requested that this funding be carried forward into 2014/15 to be used for NHS health checks for Diabities & Evaluation
Income	-1,421,910	
Net carry forward	0	
<i>Funding held in the contingency pending drawdown:</i>		
Expenditure:		
Public Health Grant - Underspend 2013/14	768,900	The Public Health Grant underspent by £769k in 2013/14 and as per the terms of the grant this underspend was transferred to a new Public Health Reserve. Of this amount the Executive at it's meeting on 12 February 2014 was asked to approve a carry forward of £98k for funding of Public health weight management schemes. The balance is also requested to be carried forward to fund public health initiatives as per the terms of the grant.
Income	-768,900	
Net carry forward	0	
2. Grants without Condition of Repayment Attached		
DH New National Adult Social Care Data Grant	35,020	In July 2013 the Department of Health announced new burden funding to support the development and implementation of new adult social care and financial statutory reporting during 2013/14 and 2014/15. Bromley received a non-ring fenced grant of £59k to support the cost of these new statutory requirements. On 11th September 2013 the Executive agreed the drawdown of the grant from the central contingency to support the Education Care & Health Services and Finance Departments implement these new statutory reporting requirements. It has been possible to absorb some staffing costs into revenue budgets and it was reported to the Executive on 2nd April 2014 that £16k could be returned to general balances. It was also reported at that time that an estimated £33k would need to be carried forward to 2014/15 for completion of the work. Now that 2013/14 expenditure has been finalised, there is £35k available to be carried forward.
Adoption Reform Grant	485,269	This is the non ring-fenced element of the Adoption Reform grant. Bromley received £548k in total of which £140k was drawn down in 2013/14 , and of which £62k was spent. The balance of grant is requested to be carried forward to support work to the develop the increased supply of adopters with the aim of reducing the backlog of children waiting adoption particularly those children who traditionally have to wait longer than average.

Description	Carry Forward Request £	Reason for Carry Forward
Tackling Troubled Families Grant	904,071	This grant is to fund the development of an ongoing programme to support families who have multi faceted problems including involvement in crime and anti social behaviour with children not in education, training or employment. This support is delivered through a number of work streams cross cutting across council departments and agencies. The sum is made up of underspends from 2012/13 (£219k) and 2013/14 (£685k)
Step Up to Social Work	72,159	In December 2011 the Executive approved the release of the Step up to Social Care funding into the CYP Budget, to run the Step Up to Social Work Programme in partnership with the London Boroughs of Bexley and Lewisham. The programme is designed to attract high calibre professionals into children's social work. In 2012/13 a request was made to carry forward funding of £171k to be spent in 2013/14. Additional funding was also received in 2013/14 which meant that the full carry forward was not required in that year. A request is now being made to carry forward to 2014/15 the remainder of the unspent 2012/13 amount of £72k to continue the programme.
Public Health Grant - Underspend 2013/14	768,900	The Public Health Grant underspent by £769k in 2013/14 and as per the terms of the grant this underspend was transferred to a new Public Health Reserve. Of this amount the Executive at it's meeting on 12 February 2014 was asked to approve a carry forward of £98k for funding of Public health weight management schemes. The balance is also requested to be carried forward to fund public health initiatives as per the terms of the grant.
Public Health Transitional Funding	42,264	LBB was allocated funds of £210,000 (£104,000 for 2012/13 and £106,000 for 2013/14) to assist with the additional costs incurred by the Council with regards to the transfer process of the Public Health function to local government. There is no right of repayment for this funding, however it is requested that the balance of £42k be carried forward to 2014/15 to assist with the potential further costs of the transfer
Funded by Government Grant Earmarked Reserve	-2,307,682	
Net carry forward	<u>0</u>	

Description	2013/14 Latest Approved Budget £'000	Variation To 2013/14 Budget £'000	Potential Impact in 2014/15
Residential and Domiciliary care - Older People	18,217	1,846	The full year effect of the final overspend is expected to be £398k . This assumes that ongoing work on reducing placement and domiciliary care costs continues and the ongoing invest to saves relating to service users with dementia or physical disabilities avoids the need for more expensive placements.
Children's Social Care - Placements	10,539	351	The full year effect of the current projection is calculated at £253k overspend . Officers continue to work towards increasing the number of inhouse foster carers so that expensive external placements can be avoided.
Children's Social Care - No Recourse to Public Funds	100	440	The full year effect of clients who have no recourse to public funds and Bromley are having to pay for has been calculated at £205k based on current numbers after the increase in budget has been taken into account. The Welfare Reform changes currently being implemented may impact on this amount further . Officers will monitor the position and report any changes as part of the budget monitoring process during the year.
Children's Disability Placements	2,693	Cr 618	The trend continues to rise in terms of the number of placements and the costs. Officers continue to work towards limiting placements where possible, providing alternative provision and driving down the costs where necessary. Current predictions estimate a pressure of £29k in 2014/15
Residential, Supported Living, Shared Lives - Learning Disabilities	22,926	Cr 568	The net underspend on residential, supported living and shared lives in the current year is forecast to produce a full year overspend of £11k, based on activity to 31/3/14 only (i.e. doesn't include changes to activity levels in future years) but including 2014/15 budget savings.
Residential Care, Supported Living, Flexible Support, Direct Payments - Mental Health	3,064	Cr 104	The full year effect is estimated to be an overspend of £110k once the effect of 2014/15 budget savings are taken into account. This does not take account of any changes in activity levels during 2014/15.
Housing Needs - Temporary Accommodation (net of HB)	2,261	83	The full year effect of the overspend is currently anticipated to be a pressure of £237k in 2014/15 . However, this only takes account of projected activity to the end of March 2014, net of assumptions on savings arising from approved invest to save initiatives (including Bellegrave), and it does not include any projected further growth in numbers beyond that point. Officers are currently modelling different scenarios to quantify the effect of further possible initiatives and also the most appropriate deployment of existing initiatives to maximise the financial benefit.
Supporting People - Contracts	3,100	Cr 257	The current year's underspend of £257k relates to the full year effect of savings achieved on contracts in previous years and re-tendering / extending contracts in 2013/14 at a reduced cost. The full year effect of this is estimated to be an underspend of £30k once 2014/15 budgeted savings are taken into account.

LATEST APPROVED BUDGET 2013/14
Care Services Portfolio

BUDGET VARIATIONS

	£'000
2013/14 Original Budget	120,753
Localisation of pay and conditions	365
Provision for homelessness less adjustment	1,000 Cr 129
Learning Disabilities - return of growth no longer required	Cr 903
Youth on remand - amount not required this financial year	500 Cr 305
Local Reform and Community Voices (Exec 3/4/13): - grant related expenditure 2013/14 - grant related income 2013/14	64 Cr 64
Local Reform & Community Voices Grant - amount not required	Cr 19
NHS Social Care Funds - Gateway Review business case (Exec 24/7/13): - expenditure - income	50 Cr 50
Adoption Reform - Exec 12/06/13 - expenditure - income	150 Cr 150
Step up to Social Work (cohort 2 2012/13) - Exec 12/06/13 - expenditure - income	105 Cr 105
Step up to Social Work (cohort 3 2013/14) - Exec 12/06/13 - expenditure - income	264 Cr 264
Step up to Social Work (cohort 3 2014/15) - Exec 12/06/13 - expenditure - income	881 Cr 881
Social Housing Fraud (2013/14) - expenditure - income	100 Cr 100
New Adult Social Care Data Collection Funding (Exec 11/9/13): - expenditure - income	59 Cr 59
Adoption Reform Part A - Exec 11/9/13 - 2013/14 expenditure - 2013/14 income	140 Cr 140
NHS Social Care Funds - Impact of Care Bill - Exec 20/11/13 - expenditure - income	216 Cr 216
Youth on Remand (Exec. 20/11/13) - grant related expenditure - grant related income	74 Cr 74
Tackling Troubled Families (CS PDS 29.10.13) - expenditure 2012/13 - income 2012/13	218 Cr 218
LD Campus Closure Grant	Cr 62
Agreed by Executive 2nd April 2014 (from S256 funds)	
Key Health & Social Care Initiatives - expenditure - income	1,700 Cr 1,700
NHS Funding to Support Social Care - expenditure - income	1,937 Cr 1,937
NHS Funding to Support Social Care - expenditure - income	2,131 Cr 2,131
NHS Funding to support Public Health & Substance Misuse programmes - expenditure - income	539 Cr 539
Adult Social Care Data Collection - amount no longer required	Cr 16

Promise Programme 2013-14 - expenditure		
- expenditure		1,542
- income	Cr	1,542
Welfare Reform Admins Costs		
- grant related expenditure		107
- grant related expenditure	Cr	107
Benefit Cap Pilot		
- grant related expenditure		249
- grant related income	Cr	249
L D Health reform Blue Badges expenditure no longer required	Cr	134
Public Health Recharges		1,359
Public Health income	Cr	1,601
<i>Carry Forwards (Care Services PDS 3/9/13):</i>		
NHS Social Care Funding (s256 Agreements)		
- expenditure		1,055
- income	Cr	1,055
Healthwatch		
- expenditure		15
- income	Cr	15
Homelessness Grant		
- expenditure		35
- income	Cr	35
Preventing Repossessions Fund		
- expenditure		75
- income	Cr	75
Step Up to Social Work		
- expenditure		171
- income	Cr	171
Troubled Families		
- expenditure		258
- income	Cr	258
Public Health Winter Health Grant		
- expenditure		12
- income	Cr	12
Public Health Transition Fund		
- expenditure		6
- income	Cr	6
Homelessness former grant		85
Winter Pressures		
- expenditure		1,542
- income	Cr	1,542
<i>Carry Forwards (Care Services PDS 29/10/13)</i>		
s256 PCT funding for Public Health		
- expenditure		44
- income	Cr	44
<u>2013/14 Budget Adjustments</u>		
Short breaks post transfer	Cr	21
Training Savings	Cr	3
Education Access post transfer to Commissioning		44
Transfer of IT post to Resources	Cr	36
Minor works transferred from Carelink to Liberata	Cr	3
Data cleansing		10
BSSD transfer		72
Recharge of nursery costs to Children's Social Care		254
SEN complaints transferred from Education		1
Recharge to SEND Pathfinder	Cr	3
Ex EFA funded social care cost - expenditure		1,088
Ex EFA funded social care cost - recharged to DSG	Cr	1,088
Rent Income re Age Concern		126
Rent Income re Age Concern (Non controllable)	Cr	126
Total Variations		<u>455</u>
Variations on Capital charges etc.		
Capital Charges	Cr	2,919
Insurance		29
Rent Income		12
Repairs & Maintenance	Cr	118
IAS19 (FRS17)		1,617
Excluded Recharges	Cr	207
Total Variations on Capital charges etc.	Cr	<u>1,586</u>
2013/14 Latest Approved Budget		<u><u>119,622</u></u>

Report No.
CS14050

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre-Decision Scrutiny by the Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: **ADULTS TRANSPORT POLICY**

Contact Officer: Colin Lusted, Business & Planning Manager, ECHS
Tel: 020 8461 7650 E-mail: colin.lusted@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: (All Wards);

1. Reason for report

1.1 This report relates to the introduction of an Adult Transport Policy.

1.2 Council funded transport is currently provided to any adult who has been assessed as requiring day activities. There is no policy detailing the circumstances under which Council funded transport will be provided.

1.3 The Council proposes to introduce an Adult Transport Policy that ensures:

- People are supported to develop and maintain their independence
- A fair and equitable way of assessing needs and ensuring appropriate transport provision
- Compliance with statutory duties
- Effective use of resources

1.4 This report seeks Portfolio Holder approval to commence a consultation process with a view to implementing an adults transport policy, subject to consideration of feedback during the consultation and Equalities Impact Assessment processes and ultimate ratification at a future Committee meeting.

2. **RECOMMENDATION(S)**

2.1 **Care Services PDS are asked to note and comment on the draft Adult Transport Policy.**

2.2 The Portfolio Holder is requested to:

- i). consider the report and the associated draft Adult Transport Policy; and**
- ii). approve the commencement of a consultation process in relation to the introduction of an Adult Transport Policy.**

Corporate Policy

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

Financial

1. Cost of proposal: No Cost
 2. Ongoing costs: Non-Recurring Cost
 3. Budget head/performance centre: 845000 (Passenger transport Service), 824*** (Service Level Agreement with day care providers for transport)
 4. Total current budget for this head: £1,731,660, £199,889 = £2,005,139
 5. Source of funding: N/A
-

Staff

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

Legal

1. Legal Requirement: Statutory Requirement National Health Service and Community Care Act 1990, and the National Assistance Act 1948; and Chronically Sick and Disabled Person Act 1970
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 525
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

- 3.1 Bromley provides Council funded transport to people who have been assessed as requiring day activities; this mainly concerns adults with learning disabilities and older people. The Council provides approximately 430 journeys each day via its Passenger Transport Service fleet.
- 3.2 Unlike many Councils, Bromley has not had a policy relating to the transportation of adults to day activities and this has meant that transport is provided without considering the circumstances of the individual. With the national and local emphasis upon maintaining and improving people's independence, and the continued pressure upon the efficient use of resources, it is proposed that an Adult Transport Policy is introduced.
- 3.3 The attached draft policy has been written in consideration of the aims identified above and incorporates best practice from the policies of other councils. The policy recognises that Bromley has a statutory responsibility for ensuring that people are able to attend the day activities they require and that each individual should be assessed on a consistent basis to ensure that the most appropriate transportation is facilitated or provided .
- 3.4 The policy incorporates a process of assessment that first establishes whether a person has an existing means of travel that they can use to access the activity without Council assistance. This initial stage of assessment considers their use of a personal or Motability vehicle as well as their local support network which includes: carers, families, friends and other members of the local community. The ability of an individual to use travel and taxi cards is also considered and whether this would present risks that require further assessment.
- 3.5 The second stage of assessment is undertaken when it has been established that no existing means of travel is available or its use presents a level of risk and considers how cognitive, psychological and mobility issues impact upon a person's independence and whether they could be assisted to travel independently. If Council funded transport is required, the assessment determines what form it should take.
- 3.6 The assessment will be undertaken by care managers using a standard, two stage, stepped process that is signed off by their manager. It will work on the basis that a person is capable of traveling independently unless the assessment determines that Council funded transport is necessary.
- 3.7 It is proposed that, subject to Committee approval, the draft Adult Transport Policy is progressed to consultation. The consultation will take place over a three month period and will include people who currently use services and their families. It is also proposed that the Mobility Forum will be commissioned to consult with key stakeholders.
- 3.8 The feedback from the consultation will form part of an Equalities Impact Assessment (EIA) that will be subject to formal sign off processes within Education, Care & Health Services.
- 3.9 The feedback from the consultation and EIA process will be summarised and considered against the draft Adult Transport Policy. The policy, summarised feedback and the outcomes from the EIA will be presented to the Policy, Development and Scrutiny Committee for consideration on whether to implement.
- 3.10 The draft policy is not currently intended to apply retrospectively but would relate to new applications from the date of implementation.
- 3.11 The Portfolio Holder is asked to consider the report and the associated draft Adult Transport Policy.

3.12 The Portfolio Holder is asked to approve the commencement of a consultation process in relation to the introduction of an Adult Transport Policy.

4. POLICY IMPLICATIONS

In accordance with the Council's commitment to Building a Better Bromley to supporting people to live as independently as possible within the community, the proposals reflect the Council's strategic objectives for people with disabilities.

5. FINANCIAL IMPLICATIONS

- 5.1 The Council's Passenger Transport Service (PTS) is responsible for providing the majority of adult passenger transport. The budgeted cost of this service is £1,731,660 pa.
- 5.2 Some of the existing older people's day services are also funded to provide transport for the people who attend them. This cost, included within those budgets, amounts to £200,000 pa.
- 5.3 The introduction of the Adult Transport Policy is expected to reduce the amount of expenditure on Council funded transport as a result of people being able to travel independently or signposted to access transport that is of lower cost to the Council. The savings that may result are not possible to quantify at this time as they would be dependent upon the circumstances of each service user.

6. LEGAL IMPLICATIONS

- 6.1 The implementation of the proposed Adult Transport Policy will be undertaken following an appropriate period of consultation. The feedback from the consultation will become part of the Equalities Impact Assessment that will be considered and signed off in accordance with agreed process.
- 6.2 The Council has a duty to carry out assessments under Section 47(1) of the National Health Service and Community Care Act 1990 where an individual has come to the knowledge of the Council and they may be in need of community care services.
- 6.3 Furthermore the Council has a duty to provide transport to users of services in certain circumstances as set out in:
Section 29 of the National Assistance Act 1948;
Section 2 of the Chronically Sick and Disabled Person Act 1970
- 6.4 The draft Adult Transport Policy references the legislation with which the Council is required to comply in meeting its statutory duties.

Non-Applicable Sections:	PERSONNEL IMPLICATIONS
Background Documents: (Access via Contact Officer)	Adult Transport Policy – Draft for Consultation – I need to see how to link this – will forward latest version via E-Mail so you can reference.

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THE LONDON BOROUGH
www.bromley.gov.uk

LONDON BOROUGH OF BROMLEY
Education, Care and Health Services

**Eligibility Policy for the Provision of
Transport for Adult Social Care
Service Users**

Version 10

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1. Policy Statement

- 1.1 This policy should be read in conjunction with the Contributions Policy Non-Residential Care Services and the Fair Access to Care Services (FACS) leaflet available via the Bromley website.
- 1.2 Adult Social Care provides transport through a variety of options to people with learning disabilities, mental health problems, physical disabilities and older people across Bromley. This policy outlines how the Council will move towards a consistent and equitable way of supporting older people, adults with disabilities and/or mental ill health in the provision of Bromley Council funded transport.
- 1.3 This policy is also being introduced because day opportunities are expected to undergo fundamental change, with a move away from people attending day centres at fixed times, to activities taking place in the community, at locations and times chosen by the service user. This policy supports those changes.
- 1.4 The provision of adult social care is aimed at promoting the maximum possible independence for the service user. In extending this principle to the provision of transport, this policy sets the criteria that will be used to assess whether the service user's transport need can be best met through independent travel arrangements, privately funded transport or whether Council arranged and funded transport assistance is necessary.
- 1.5 This policy rests upon a general assumption and expectation that wherever possible, service users will meet their own needs for transport to access and take advantage of services, or support to facilitate them.
- 1.6 Transport is a means of accessing other services or support. The overriding principle is that the decision to provide transport is based on a person's individual circumstances including: needs, risks, outcomes and on promoting independence.
- 1.7 Funded transport will only be provided if, in the opinion of the assessor, there is no alternative and appropriate transport available (be it personal, with the assistance of family / friends or public transport) and it is the only reasonable means of ensuring that the service user can be safely transported to an assessed and eligible service.

2. Scope

- 2.1 The assessment of need forms the basis on which Adult Social Care responds to requests for assistance and is concerned with exploring a persons' presenting needs and determining their eligibility for services. The provision of transport will only be considered in relation to meeting the needs of adults aged 18 years and over who, have been assessed

as eligible for services and/or support from Adult Social Care. As part of the Assessment and Care Planning process, the need to attend a community service and/or to pursue other activities away from the service user's home may be identified. The need for transport to any community service or activity service must be part of the assessment of a persons' needs and any subsequent review(s) and can only be provided where the person is eligible for a service in accordance with the Fair Access to Care Services policy adopted by Bromley.

People aged 18 years and over and who require assistance to access full-time education are referred to the SEN transport policy.

- 2.2 Where an individual is provided with a Personal Budget or requests a Direct Payment to meet their assessed needs for care, the same principles will apply as to those people opting to receive support directly from Adult Social Care. The cost of transport will only be included in the Personal Budget or Direct Payment where no other suitable alternative is available and it is considered that the service user is eligible for this support.
- 2.3 The provision of Council funded transport is not subject to a charge under the Council's 'Contributions Policy Non-Residential Care Services'. The policy may be reviewed from time to time.

3. Legal Framework

3.1 Adult Social Care has a legal duty to provide transport to service users who are eligible for social care support in certain circumstances. The following legislation sets out that duty as follows:-

Section 47 (1) of the National Health Service and Community Care Act 1990 sets out the council's duty to assess an individual's need for community care services. It states that:

Where it appears to a local authority that any person for whom they may provide or arrange for the provision of community care services may be in need of any such service, the authority:

- a) shall carry out an assessment of their needs for those services; and
- b) having regard to the results of that assessment, shall then decide whether their needs call for the provision.

Section 29 (1) of the National Assistance Act 1948 provides a power to local authorities to make a variety of welfare arrangements for disabled people; the power becomes a duty by virtue of directions given by the Secretary of State.

Section 2 (1) of the Chronically Sick and Disabled Person's Act 1970 supplements and extends section 29(1) by placing a duty on local authorities to make arrangements for a range of welfare services where

satisfied that it is necessary to do so to meet the needs of disabled persons to whom the section applies. Section 2(1) includes the provision of or assistance with, facilities for travel.

The Carers (Equal Opportunities) Act 2004, which commenced on 1 April 2005, promotes cooperation between authorities and requires councils to inform carers of their right to an assessment which takes into account their outside interests (work, study, leisure).

The arrangement for assessment and care management to meet the requirements of the NHS and Community Care Act 1990 is set out within the 'Fair Access to Care Services' guidance.

4. **Strategic links to Local and National Priorities and plans**

4.1 The policy context is reflected by local and national priorities and plans which are set out in a number of key documents:

"Our Health, Our Care, Our Say"(2006) which gives a framework for Adult Social Care to achieve a fresh approach in the delivery of all community based services and outlines that services need to centre on the person, promote increased choice and control, be flexible and responsive, promote a healthy lifestyle with an emphasis on maintaining a person's independence.

Putting People First, Transforming Social Care (2007) sets out the shared aims and values which will guide the transformation of Adult Social Care, which consists of 4 themes:

- **Facilitating access to Universal Services** – ensuring support and services are available to everyone locally including things like transport
- **Building Social Capital** – building a society where everyone has the opportunity to be part of the community and experience the support that can come from family and friends
- **Prevention and Early Intervention** – supporting people to stay independent for longer
- **Choice and Control** – developing self- directed support and ensuring that services/support are able to meet people's needs

Valuing People – A new strategy for Learning Disability sets out the Governments commitment to improving peoples' lives, based on rights, social inclusion, choice and independence.

Valuing People Now (2009) sets out the priorities for Learning Disability Services. The main priorities are personalisation, so that people have choice and control, increased opportunities for day time and evening activities and inclusion in their communities.

The policy is also in alignment with the Council's strategic document Building a Better Bromley where there is a focus upon independence and wellbeing for Bromley's residents.

5. Aims of the policy

- 5.1 The aim of this policy is to reflect national and local priorities whilst underpinning the proposed changes to the existing arrangements for access to and the provision of Bromley's Council funded day opportunities.

The policy is based upon:

- Promoting independence
- Maximising choice and control
- Supporting a healthy lifestyle
- Improved quality of life
- Maximising dignity and respect
- The provision of local accessible services and support

6. Principles

- 6.1 The overarching principle is that as part of the Council's commitment to inclusion and independence, individuals who can travel to a community activity, either independently or with assistance from family, friends or support providers will do so. Adult Social Care will facilitate the signposting towards appropriate transport options.
- 6.2 People who receive higher rate disability allowance and those who qualify for concessionary travel assistance such as: bus passes, Blue Badges, Motability Vehicles and Taxi Cards will be expected to apply and use this as and when appropriate according to assessed needs.
- 6.3 Prior to providing transport assistance, a principle of reasonableness will be adopted i.e. an exploration will be undertaken in any given situation as to whether it is reasonable to expect individuals to make their own arrangements, all transport options have been examined and the outcomes have been identified and evidenced.
- 6.4 Following an assessment of need, Council funded transport will only be provided to meet an eligible assessed need. The transport provided will be appropriate for that need, will provide value for money and be cost effective.

7. Eligibility and Guidance in determining the need for transport

- 7.1 The decision to provide assistance with transport will follow consideration of the existing (non-Council funded) transport options that are available. An assessment of the risks associated with using non Council funded transport and a person's mobility will be part of the

support planning process. The purpose of transport should be clearly stated on an individual's Support Plan.

7.2 In general, this Policy is based on the assumption that service users will travel independently except where assessment shows that this is not possible. The test used in the assessment should be 'what will happen if Adult Social Care does not provide transport' i.e. are there other ways in which the service user can reasonably be expected to attend services and/or support making his/her own arrangements to get there. The provision and/or funding for transport should only be considered if the service user has needs categorised in accordance with the Council's Fair Access to Care Services Eligibility Framework and Guidance.

7.3 Assessment of eligibility, for the provision of transport assistance, will be undertaken in consideration of:

- The availability of existing transport
- The ability of a person to travel independently with regard to their physical mobility and other factors that may introduce risk

7.3.1 Availability of existing transport:

Council funded transport will not be provided to service users if:

i) They have their own or a "Motability" vehicle which they drive themselves. In this instance there will be consideration of whether it is reasonable to expect that the service user will use that vehicle in order to travel to the location of the day opportunity.

If it is unreasonable, the appropriateness of the provision of a Motability vehicle should be questioned and alternative available transport provision 7.3.1 (ii – v) considered.

ii) They have a "Motability" vehicle of which they are not normally the driver themselves. Similarly, there will be consideration of whether it is reasonable to expect that the service user will use that vehicle in order to travel to the location of the day opportunity.

If it is unreasonable, the appropriateness of the provision of a Motability vehicle should be questioned and alternative available transport provision 7.3.1 (iii – v) considered.

iii) They have carers / neighbours / family / friends who are able to transport them. Please note that where it is identified that a carer will provide transport it is important that the assessor is able to demonstrate that the impact of this has been appropriately considered in an assessment of the carer's needs. Where it is concluded that the carer cannot provide transport because it would place an unreasonable

demand on them, alternative available transport provision 7.3.1 (iv – v) must be considered.

Where carers or friends have been identified as being able to provide transport, alternative arrangements should be detailed in the contingency plan to cover periods where they are unable to do so.

iv) They have a taxi card which they are able to use to attend the day opportunity. In cases where a service user's ability to use the taxi card without a reasonable level of risk is questionable – please refer to 7.3.2.

v) They have a bus pass which they are able to use to attend the day opportunity. In cases where a service user's ability to use the bus pass without a reasonable level of risk is questionable – please refer to 7.3.2.

7.3.2 Assessment of capability to travel independently

Where it has been established that no existing transport access is available, or its use may introduce unreasonable levels of risk to a person when travelling independently ('travelling independently' means being able to travel without Council funded transport), an assessment will be undertaken.

The assessment will be undertaken in consideration of the proposed method of transport (for instance, a person travelling on a bus will need a higher level of communication, understanding and mobility than a person travelling 'door to door' in a taxi).

The assessment will include:

- Mental capacity
- Communication difficulties
- Psychological factors e.g. mental health, dementia, agoraphobia
- Vulnerability – including impact of past experiences
- Any other factors that may affect personal safety

and issues regarding mobility such as:

- Ability to walk outside
- Requirement for wheelchair / other walking aid
- Ability to enter and leave a property
- Ability to get in and out of a vehicle
- History of falls
- Ability to use stairs

The assessor will use this information to determine whether the service user:

1. Is capable of travelling independently on the proposed method of transport without an unreasonable level of risk
2. Requires some training, support or assistance that will enable them to be capable of travelling independently in the near future
3. Is not capable of travelling independently on the proposed method of transport and will therefore recommend a method of Council funded transport that is appropriate to their needs

7.4 Identification of appropriate transport

Once eligibility has been confirmed via assessment as detailed above, it will be the duty of Adult Social Care to facilitate appropriate arrangements for transport. Directly provided transport services will be provided only once other alternatives have been considered and ruled out. The range of transport assistance may include:

- Assistance with using public transport, e.g. travel buddies
- Use of a Motability vehicle funded from higher rate mobility component of Disability Living Allowance
- Taxi journey – shared with other clients
- Taxi – solely for the use of the client
- Transport in Council funded vehicles, e.g. minibuses

7.5 Resources from Adult Social Care are unlikely to be allocated specifically to meet transport related needs where an individual:

- is in receipt of the higher rate mobility component of the Disability Living Allowance, the purpose of which is to assist those who have mobility problems, with severe difficulty walking or who need help getting around out of doors. Under normal circumstances no-one in receipt of the higher rate mobility allowance would receive funded transport, unless there are factors limiting their ability to fully utilise the benefits of the allowance e.g. geographical location, the nature of the disability, wheelchair type or carer support requirements. The support plan will determine the level of support offered in these circumstances as part of the assessment process.

NB. The Social Security Contributions and Benefits Act 1992 section 73(14) states that while social services authorities are empowered but not obliged to charge for such transport services, in assessing a person's ability to pay, his/her mobility component of DLA if received must be ignored.

- lives in a registered residential care home as these are subject to the terms and conditions of the contract between the Council and the care home. However, if the individual is assessed as having the ability to travel independently, or with minimal intervention, the care home will make provision to support independent travel if they are responsible for transport arrangements. If the individual is a tenant in extra care

housing, supported accommodation or an adult placement scheme, they will be subject to the same assessment and care planning arrangements as people living in their own homes or with relatives. In some circumstances the cost of the placement covers the full range of support needs, including transport, to attend community activities including college.

- 7.6 There is no single definition of what is a reasonable distance/time to access day opportunities that meet social care needs. An assessor should be able, having information about an individual's abilities and the transport options available, to define "reasonable" for that individual. It will be for each person to decide how far they are willing to travel in order to extend their choice but if they choose to access a service further than one capable of meeting their assessed need, they will be required to fund the additional transport cost from their own resources.

The time taken to travel to the service destination or the cost of alternative means of transport should also be taken into account by the assessing officer as these may be prohibitive for the individual.

- 7.7 Geographical isolation may be a factor in an individual's ability to access day opportunities outside the home. People living in rural or outlying areas of the Borough may experience additional barriers in terms of the frequency and number of buses they are required to use, or the prohibitive cost of taxi fares. The availability of alternative accessible and affordable means of transport must be considered when assessing an individual's ability to travel independently.

- 7.8 Where the individual is reliant on a relative or other carer to drive a Motability car, consideration will be given to supporting carers respite needs, including enabling them to work. None the less, if an individual or carer makes the decision that the Motability vehicle will not be used for the intended purpose the onus must be on the individual and/or carer to make alternative appropriate arrangements.

8. Implementation

- 8.1 This policy will be applied from XX XXXXX 2014 to any new adult social care service users
- 8.2 It is not currently intended to retrospectively apply this policy to any service users in receipt of transport prior to the policy implementation date stipulated in 8.1. The Council will review people's transport arrangements as day services change and are modernised.

9. Monitoring, Review and Reassessment

- 9.1 Travel arrangements and any impacts this policy has had on the ability of vulnerable people to access appropriate services to meet their

eligible social care needs, will be considered by assessing officers at a review or reassessment of the individual's needs.

- 9.2 An individual or their authorised representative can request a review of their social care assessment if at any time they consider their needs have substantially changed..
- 9.3 At any time in this process the individual or their representative can make a complaint under the Council's Complaints Procedure.

10. Complaints

- 10.1 Bromley welcomes and responds positively to all comments, compliments and complaints as a means of demonstrating its commitment to working in partnership with individuals and carers.
- 10.2 A copy of the Complaints Procedure is available on request.

More information is available from:

Email: socialcarecomplaints@bromley.gov.uk

Telephone: 020 8313 4491

Address: Civic Centre,
FREEPOST MB 1658,
Stockwell Close,
Bromley,
BR1 3UH

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Report No.
CS14051

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre-Decision Scrutiny by the Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Key

Title: **FOSTER CARERS MAINTENANCE PAYMENTS**

Contact Officer: Kay Weiss, Assistant Director Safeguarding and Social Care
E-mail: kay.weiss@bromley.gov.uk

Ian Leadbetter, Head of Social Care, Care and Resources
E-mail: ian.leadbetter@bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director of Education, Care & Health Services

Ward: (All Wards);

1. Reason for report

This paper sets out the details of the proposed increase to the weekly maintenance element of the fostering allowances and options for consideration in relation to the professional fee element.

2. **RECOMMENDATION(S)**

2.1 **The Care Services Policy and Scrutiny committee is asked to:**

- i). **Recommended the Portfolio Holder approves the 2.3% increase to the weekly maintenance element of the fostering allowance in line with the recommendation of the Fostering Network**
- ii). **Consider and comment upon the various options for an increase to the weekly professional fee element of the fostering allowance**
- iii). **Recommend to the Portfolio Holder which option, if any, they would endorse.**

2.2 **The Portfolio Holder is asked to approve the**

- i). **2.3% increase of the weekly maintenance element of the fostering allowance; and**

- ii). **preferred option for an increase to the weekly professional fee element of the fostering allowance.**

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People:
-

Financial

1. Cost of proposal: Estimated Cost: An additional £35,730
 2. Ongoing costs: Recurring Cost:
 3. Budget head/performance centre: 833120
 4. Total current budget for this head: £5,397,800
 5. Source of funding: Base budget
-

Staff

1. Number of staff (current and additional): 20fte
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: None:
 2. Call-in: Applicable:
-

Customer Impact

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

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 At the Care Services PDS on 19th June 2012, Members authorised that a revised payment structure for in house foster carers be considered by the Executive, indicating that they supported the proposal.
- 3.2 On 20th June 2012 The Executive approved the revised payment structure which was implemented from 1st August 2012.
- 3.3 Our revised payment structure for foster carers was made up of two elements; a weekly maintenance allowance aligned to the Fostering Network's recommended minimum amount, to cover the 'day to day' cost of caring for a child and a professional fee element (reward) of £200 per week per child. The professional fee is the sum paid for the work undertaken by the carer for providing care to the child and the other associated tasks required of a foster carer.
- 3.4 Members also agreed to an enhanced professional fee for children over the age of 13 and those with challenging or complex needs of £250 per week in recognition that we have insufficient numbers of in house carers for these children and carers willing to consider these types of placements are difficult to recruit and should be paid more
- 3.5 In giving its approval the Executive also endorsed that the revised scheme should be reviewed after three years to ensure that it remained fit for purpose.

3.6 Maintenance Element

- 3.7 Annually, the Fostering Network recommends a percentage uplift to its maintenance allowance that takes into account general cost of living increases. In 2013/14 it recommended an uplift of 2%, which was approved by the Portfolio Holder. This recommendation tends to be accepted by London boroughs to prevent small distinctions between neighbouring agencies.
- 3.8 The Fostering Network is recommending a 2.3% uplift for 2014/15 for the maintenance element of the weekly allowance.
- 3.9 The table below indicates the actual rise in monetary amounts

Age	Bromley 2013/2014	Fostering Network 2014/2015 ¹	Bromley 2014/2015 ²
0 – 4	161.00	164.71	164.71
5 – 10	183.54	187.77	187.74
11 – 12	228.55	233.83	233.80
13 – 15	228.55	233.83	233.80
16+	277.55	283.95	283.92

¹ 2.3% uplift for 2014/15

² Amount rounded to be divisible by 7 to give an equal daily rate

- 3.10 Members will be aware that in the current economic climate external providers, including independent fostering agencies and residential units have been asked to absorb any inflationary pressures and the majority have agreed not to pass these on to the local authority.
- 3.11 However, when considering whether to apply the same principle to our in house foster carer allowances, Members may want to consider that foster carers have not been exempted from the significant increases in day to day commodities such a fuel and food costs that all families have experienced over the past year. 2.3% applied to the 2103/14 maintenance allowances provides a modest increase ranging from just over £3 per week for 0-4 year olds to just over £6

for 16+ year olds. It will also ensure Bromley foster carers remain aligned to the national Fostering Network rates.

3.12 A 2.3% increase to the maintenance allowance will add an additional £36,800 to a projected spend of £1.6m. A 2.5% inflationary increase has been attached to the budget for 2014/15.

3.13 Professional Fee

3.14 The professional fee agreed by the Executive in June 2012 remains in force, namely £200 per child per week for young people under the age of 13 and £250 per child per week for those over 13 or those with complex needs.

3.15 No uplift was attached to the professional fee element in 2013/14

3.16 Members may consider that the professional fee agreed in 2012 should continue to be applied until the payment structure is reviewed in its entirety for the 2015/16 financial year.

3.17 Alternatively, Members may wish to consider whether an inflationary uplift should be applied to the professional fee in addition to the maintenance allowance element.

3.18 The possible options, should Members be minded to consider an uplift to the professional fee would be to:

- i. Give no uplift for a second year running.
- ii. Apply the same 2.3% as being recommended for the maintenance allowance. This would increase the weekly professional fee to £204.60 and £255.75 per week respectively and add an additional £36,800 to a projected spend of £1.6m.
- iii. Apply the 1.7% inflationary uplift that was applied to staff salaries for those earning less than £21k pa. This would increase the fee to £203.40 and £254.24 per week respectively. This would add an additional £27k to the projected £1.6m spend.
- iv. Apply a 1% increase which would increase the fee to £202 and £252.50 per week respectively and would add £16,000 to the £1.6m projected spend.

2.19 Similar to the maintenance element budget, the fee element budget has been credited with a 2.5% uplift for 2014/15 and therefore there are sufficient funds to cover the costs.

2.20 The recruitment of foster carers remains a significant challenge with Bromley competing with neighbouring Borough's and independent providers. A bench marking exercise was undertaken as part of the work for the revised allowance scheme in 2012 with neighbouring authorities and using some 'intelligence' gathered from IFA providers. Bromley's revised scheme fared well against our competitors, however we are aware that our neighbouring authorities have also reviewed their payment schemes since.

2.21 In addition, there has been a sharp increase in certain areas of the borough of aggressive recruitment by other local authorities and independent providers which have the potential to impact on Bromley's own recruitment efforts if the payment scheme is perceived by our carers as not keeping abreast with inflation.

4. FINANCIAL IMPLICATIONS

The possible financial implications are highlighted in the body of the report.

Non-Applicable Sections:	Policy implications Legal implications Personnel implications
Background Documents: (Access via Contact Officer)	Revised payment structure for foster carers – Part One paper for the Executive 20June 2012

Report No.
CS14052

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre-Decision Scrutiny by the Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: **FOSTERING SERVICE ANNUAL REPORT 2013/14**

Contact Officer: Kay Weiss, Assistant Director Safeguarding and Social Care
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Ian Leadbetter, Head of Social Care, Care and Resources
E-mail: ian.leadbetter@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: (All Wards);

1. Reason for report

- 1.1 The Fostering National Minimum Standards 2011 requires the Fostering Agency to produce a report on fostering activity to the Agency Executive and an updated Statement of Purpose on an annual basis.
- 1.2 This report presents to the Care Services Policy Development and Scrutiny Committee details of activity from 1 April 2013 to 31.March 2014, together with the updated Statement of Purpose (Appendix 1).
-

2. **RECOMMENDATION(S)**

The Care Services Policy, Development and Scrutiny Committee is asked to:

- (i) Consider and comment upon the report and revised Statement of Purpose.**
- (ii) Recommend that the report and revised Statement of Purpose be agreed by the Care Services Portfolio Holder.**

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People:
-

Financial

1. Cost of proposal: No Cost:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: 833120
 4. Total current budget for this head: £4,623,910
 5. Source of funding: Base budget
-

Staff

1. Number of staff (current and additional): 22
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement:
 2. Call-in: Applicable:
-

Customer Impact

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

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 The Fostering Services Regulations 2011 and National Minimum Standards 2011 require all fostering services to provide, and annually review, a written Statement of Purpose setting out the aims and objectives of the service and facilities provided.

3.2 In addition, Standard 25.7 of the National Minimum Standards 2011, requires the Fostering Agency to produce a report on fostering activity to the Agency Executive, to:

- Receive written reports on the management, outcomes and financial state of the agency;
- Monitor the management and outcomes of the service in order to satisfy themselves that the agency is effective and is achieving good outcomes for children;
- Satisfy itself that the agency is complying with the conditions of registration.

3.3 The Bromley Fostering Service Statement of Purpose reflects the Council's corporate priorities and strives to ensure that there are sufficient foster carers to meet the needs of our children and young people.

3.4 Performance:

3.5 The Fostering Service provides a service for looked after children. The service is committed to identifying and supporting stable placements for children and young people where foster care is the identified plan.

3.6 2013/14 has been a busy year for the fostering service, which has included the requirement to implement significant challenging changes to legislation and practice, reviews and revisions to policies and procedures as well as changes to enhance the quality of support and training available to foster carers.

3.7 As of the 31st March 2014 Bromley had 277 looked after children of which 68.5% were placed with in house foster carers; a decrease of 1.9% from the 31 March 2013. As of 31 March 2014, 8.7% were placed with connected persons foster carers; a decrease of 6% from 31 March 2013.

3.8 The service provides a range of placements including emergency placements, short term and bridging placements, long term care and short breaks. As of the 31st March 2014 Bromley had 121 foster carer units; a decrease from 133 on 31 March 2013.

3.9 Since 1 April 2013, 11 new fostering units have been approved and 23 fostering units have had their approval as foster carers terminated. Termination of approval occurs for a variety of reasons and the total number during the review period is not unusually higher than in previous years. Since 1st April 2013, 9 connected person foster carers have had their approval terminated. Connected person foster carers are carers who are related or friends already known to the child who came forward to be assessed as their foster carer. They are approved only for a named child or young person related or known to them. In seven of these cases, the young persons' being cared for had attained the age of 18. Only one connected person foster carer has had their approval terminated because of placement breakdown. In this instance an

alternative family and friends carer was approved to take over the care of the young person. In the case of the second young person the connected person carer became unwell and was no longer able to care for the young person in question. In this case also an alternative connected person carer was approved to take over the care of the young person in question. No other connected person carers had their approval terminated for either a safeguarding or quality of care reason.

- 3.10 In July 2013, the fostering team assumed responsibility for undertaking assessments of connected persons. This change was made as part of the Court Pilot Project to reduce the timescales for court proceedings to twenty six weeks from Issuing to Final Hearing. The Connected Person Project undertook assessments of connected person foster carers as well as those applying for Special Guardianship Orders in relation to specific children.
- 3.11 During the period under review thirty one assessments were completed within very short timescales. Assessments included those of connected persons foster carers and special guardians. A total of seventeen children were placed on the basis of temporary approval under Regulation 24 of the Care Planning, Placement and Case Review Regulations 2010 and assessments were completed in relation to thirteen other children as part of special guardianship order applications. A total of twenty nine children achieved permanence through Special Guardianship. In the context of permanence, thirteen children were matched at the Fostering Panel and a further 17 children were also adopted.
- 3.12 In January 2014, a Deputy Group Manager was recruited to the project and three social work staff were recruited between March and April 2014. This team is now part of a discrete service within the Fostering Team. These changes enabled assessments to be concluded within very short timescales and have contributed towards Bromley's good performance in ensuring that care proceedings are concluded within the new statutory 26 week timeframe.
- 3.13 As of 31 March 2014 there were 16 "Form F" foster carer assessments allocated within the Fostering team at varying stages of completion. There were five potential fostering units waiting to proceed to a 'Skills to Foster' course.
- 3.14 The Fostering Team received 78 registrations of interest about fostering for Bromley during 2013/14. At the Screening Call stage, 23 applicants failed to proceed to full assessment as a result of either not meeting the minimum requirements (such as bedroom availability or age criteria) or applicants deciding not to proceed after discussion.
- 3.15 Following initial visits a further 19 prospective applicants failed to proceed for a variety of reasons including self rejection following discussions with the Supervising Social Worker. It should be noted that following the comprehensive Initial Visit a number of applicants strongly expressed the view that they were unwilling to proceed due to the intrusive nature of the assessment process.
- 3.16 During the period under review, 31 prospective foster families were recommended for progression to the 'Skills to Foster' Course of which 17 were recommended to progress to Stage Two of the assessment process, 3 did not demonstrate the required skills and 8 withdrew or failed to attend. The remaining 3 families are booked to attend the next "Skills to Foster" course schedule for May 2014.

3.17 Regulation 17 and National Minimum Standard 21.10 states that on approval foster carers are given information either in a Handbook or by an electronic resource which covers: policies, procedures, guidance, financial information, legal information and insurance details. In 2013/14 the Fostering Service undertook a comprehensive review of its Foster Carer's Handbook. The review was co-ordinated by an Independent Consultant in conjunction with the Fostering Team and involved consultation with all stakeholders and a focus group of foster carers. The new Foster Carer Handbook reflects current government legislation and guidance, as well as London Borough of Bromley procedures, and is now available electronically for all London Borough of Bromley foster carers and staff. The official launch of the Handbook was in April 2014.

3.18 Recruitment Activity:

3.19 During 2013/14 the service contributed to work being undertaken on our foster carer sufficiency requirements and also reviewed our recruitment strategy to ensure our advertising for carers was targeted to our assessed future needs. This has led to a very clear programme of recruitment being developed with the News Shopper group of publications commencing April 2014/15.

3.20 Work has also continued to increase the range of information available to potential carers through the council's website, actively re-enforcing fostering for Bromley as the destination of choice for local families considering a career in fostering.

3.21 The service has continued to actively advertise for foster carers. A fostering feature was published in the News Shopper and work is currently underway to host an information event to promote looked after children and fostering following publication of this article. We continue to work with the communications team to market fostering in Bromley

3.22 A part time member of staff was recruited in December 2013 to focus specifically on the responses to, and management and progression of, applications from interested potential foster carers. This appointment has supported the process of application and improvements in and response times.

3.23 The Fostering Services (Miscellaneous Amendments) Regulations 2013 introduced a number of significant changes with respect to the assessment and approval of foster carers. In September 2013 the Fostering Team implemented a new two stage recruitment process with clearly defined timescales for responding to expression of interest from prospective applicants. The Fostering Team has set an objective to complete the approval of prospective foster carers within six months of Initial application. Following the appointment of the part-time Recruitment Co-Ordinator the progress of applications have been effectively monitored. All systems and processes within the team have been streamlined to speed up the recruitment process with the aim of meeting regulatory requirements whilst ensuring sufficiency of placements to looked after children and young people.

3.24 The fostering service has piloted involving young people in the assessment of prospective foster carers. This has included undertaking a small presentation at the skills to foster course. Members of the Living in Care Council (LinCC) led on the development of information packs to be given to Looked After Children (LAC) and the development of a web site for looked after children which went live in October 2013.

3.25 Training and Support

- 3.26 During 2013/14 work was undertaken to completely review and update the foster carer handbook. This included the updating of various policies and the inclusion of revised statutory requirement. The handbook, which now completely web based, was launched at our annual foster carer conference in April.
- 3.27 2013./14 also saw a review of our training programme resulting in training procurement and course organisation being transferred to the corporate training team. In addition, foster carers have been included in the new learning hub arrangements which allows the training team to communicate with them electronically.
- 3.28 Our support groups for foster carers continue to be well attended and we are looking at developing these groups further using our experienced foster carers as a resource. A refreshed Bromley Foster Carer Association (BFCA) has continued to work with officers to ensure that we work in collaboration with carers to continue to improve the service.

3.29 Allowances

- 3.30 The Fostering Allowance Scheme introduced in August 2012, has now been effectively implemented.
- 3.31 Our new simplified scheme remains extremely competitive to neighbouring authorities and in some cases match allowances paid by Independent Fostering Agency providers. It is encouraging to note that the new allowance scheme has not had a significant and ongoing negative impact on the recruitment or retention of foster carers.
- 3.32 Changes to legislation in July 2013 now requires the local authority to ensure that its allowance policy does not differentiate between foster carers who have a connection to the child being cared for and those who do not. This has necessitated a review of our allowance scheme to ensure that the criteria for payment of a professional fee to carers is clear and compliant with legislation.

3.33 Fostering Panel and Agency Decision Maker.

- 3.34 The Fostering Panel met nineteen times between 1 April 2013 and 31 March 2014. Attendance at panel has consistently averaged seven members at each panel over this period. This demonstrates a continuing high level of commitment from our panel members. However it has been recognised that extending the panel's central list would widen expertise and help prevent the risk of a panel failing to be quorate. It should be noted, however, that the increase in the number of panel meeting did not result in any marked decrease in attendance and this is evidence of the commitment of panel members to supporting Bromley's Fostering Service to delivery positives outcomes for looked after children and young people for whom it has a responsibility.
- 3.35 Standard 14(2) of the National Minimum Standards for Fostering states that Panels must provide a quality assurance feedback to the Fostering Service provider on the quality of reports being presented to panel. In March 2013 a feedback form for panel members was introduced and is in the process of being monitored in respect of how useful providing feedback in this format is, and its effectiveness towards improving standards within the reports

that are presented to panel. Members noted a marked improvement in the quality of reports being presented to panel. This was especially so with regard to the matching of children and young people with permanent foster carers. The wishes and feeling of children and young people was evident in their feedback and this was positively commented upon by panel members who found this helpful in terms of providing a context for making a clear recommendation to the agency decision maker.

- 3.36 The fostering panel is responsible for making recommendations to the Agency Decision Maker as to the suitability of applicants to become foster carers and any conditions that should be attached to their approval.
- 3.37 In addition, the fostering panel also makes recommendations in relation to the long term matching of children to their foster carers and formally reviews all foster carers after their first year following approval and every three years subsequently.
- 3.38 The Agency Decision Maker is Kay Weiss, Assistant Director, Children's Social Care. In compliance with the National Minimum Standards the fostering panel recommendations have been considered and ratified within the prescribed timescale

3.39 Fostering Service Management

- 3.40 Our new Group Manager of the combined Fostering and Adoption service has been in post since 11 February 2013.
- 3.41 We have been successful in appointing a new Deputy Group Manager who will be responsible for the assessment function of the adoption element of the new service and a new Deputy Group Manager for post adoption support has been appointed on a temporary basis. Together with the appointment of a Deputy Group Manager in the Fostering Service and an additional locum Deputy Group Manager in the Fostering service, and the Deputy Group Manager for the connected person service, this will provide a robust and cohesive leadership team to drive forward improvements.

3.42 Future Developments

- 3.43 An audit of training needs and the development of a comprehensive training programme has been completed and implemented. This has had a positive impact and foster carer attendance at relevant training courses is markedly improved. Responsibility for coordinating training for carers is being undertaken by the Learning and Development Team working in close partnership with the fostering service and the Deputy Group Manager Fostering. We have actively promoted the necessary courses and support for foster carers to complete the requirements of the Training, Standards and Development (TSD) programme which foster carers are required to complete within their first twelve months from approval.
- 3.44 We are in the process of developing an interactive website for our foster carers that will enhance communication as well as contain links to the Foster Carer Handbook, policies and procedures, and contact details for support organisations. The website will also provide links to our recruitment pages and application process further increasing our exposure to potential foster carers.

3.45 In addition, we will continue to explore ways to continually attract new carers to Bromley, both to replace carers that have decided to retire from fostering and to meet the needs of children and young people requiring placements.

4. LEGAL IMPLICATIONS

The production of an annual report and updated statement of purpose is a statutory requirement in The Fostering Services (England) Regulations 2011.

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



**London Borough of Bromley
Education, Care and Health Services
Children's Social Care**



Bromley Fostering Service

Statement of Purpose

2014/2015



CONTENTS

1. Values, Aims and Objectives of Bromley's Fostering Service
2. Organisation and facilities
3. Services provided
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6. Complaints Procedure

APPENDIX 1: STAFFING AND STRUCTURE

APPENDIX 2: QUALITY ASSURANCE



The Fostering Services National Minimum Standards, 2011, Section 16, state that every Fostering Service should have a clear statement of purpose which is available to, and understood by, foster carers, staff and children, and is reflected in any policies, procedures and guidance. It is available to the responsible authority and any parent or person with parental responsibility.

1. Values, Aims And Objectives Of Bromley's Fostering Service

Mission Statement

We believe that in most circumstances children are best cared for in their own families. Where this is not possible, we strive to ensure that children have an experience of family life where they are safe, nurtured and respected for as long as necessary and where all their needs, including, where possible, their racial and cultural identity needs, are met. We accept that for some children the experience of family life is not appropriate because of the effects of past trauma. Every child should be able to experience a secure and happy family life being safely cared for by a loving adult or adults. We strive to achieve this through providing a responsive and effective service to individuals and families from all backgrounds involved in fostering.

Values

- The child's welfare, safety and needs are at the centre of their care.
- Children should have an enjoyable childhood, benefiting from excellent parenting and education, enjoying a wide range of opportunities to develop their talents and skills leading to a successful adult life.
- Children are entitled to grow up in a loving environment that can meet their developmental needs.
- Every child should have his or her wishes and feelings listened to and taken into account.
- Each child should be valued as an individual and given personalised support in line with their individual needs and background in order to develop their identity, self-confidence and self-worth.
- The particular needs of disabled children and children with complex needs will be fully recognised and taken into account
- The significance of contact for looked after children, and of maintaining relationships with birth parents and the wider family, including siblings, half-siblings and grandparents, is recognised, as is the foster carer's role in this.
- Children in foster care deserve to be treated as a good parent would treat their own children and to have the opportunity for as full an experience of family life and childhood as possible, without unnecessary restrictions.
- The central importance of the child's relationship with their foster carer should be acknowledged and foster carers should be recognised as core members of the team working with the child.
- However, no-one has a right to be a foster carer - fostering decisions must focus on the interests of the child.
- Foster carers have a right to full information about their foster child.
- It is essential that foster carers receive relevant support services and development opportunities in order to provide the best care for children.
- Partnership between all those involved in fostering children is essential to deliver the best outcomes for children; this includes the Government, local government, other statutory agencies, Fostering Service providers and foster carers.

Aims

- To provide a high quality Fostering Service where all people are responded to promptly, treated courteously and fairly, and given equal consideration regardless of ethnic background, age, marital status, religion, language, sexual orientation and disability. The Department will take the necessary steps to ensure applicants have equal access, e.g. regarding physical access to buildings or religious/language differences. The Department aims to provide a comprehensive Fostering Service in co-operation with other teams and Departments, birth families and other service users to ensure there is a coherent local service to meet identified needs of children in the care of the Local Authority.
- To provide a comprehensive Fostering Service to meet the needs of children, birth families and social work staff by recruiting sufficient numbers of in-house foster carers to meet the needs of the local community.
- To ensure that the needs, wishes and safety of the looked after child are at the centre of the fostering process and that the views of looked after children, their parents and carers are actively sought and listened to.
- To provide as far as is reasonably possible practical support and services which will enable the child to return to, or remain with, his/her family of origin, except in those circumstances where it is considered that it would be detrimental to the child's welfare, due to issues of significant harm.
- In making plans for the fostering placement for a Looked After Child, the Department's first aims are to ensure:
 - a) the child's welfare is safeguarded and promoted throughout their placement
 - b) that children are securely attached to carers capable of providing safe and effective care for the duration of the placement.
- To ensure that people interested in becoming foster carers will be welcomed without prejudice, responded to promptly and given clear information about the recruitment, assessment and approval process. They will be treated fairly, openly and with respect throughout the process of becoming a foster carer.
- To match children with approved foster carers who will ensure that their identity, including racial and ethnic identity, is promoted and contact with their birth family is maintained, where appropriate, and that there is minimum disruption to continuity of education and established social contacts and activities.
- To recruit suitably qualified and experienced people to deliver the Fostering Service who will provide services to ensure compliance with all required safety checks.
- To ensure that the Fostering Service is resourced to meet the above aims and that the premises from which the Fostering Service operates are fit for their purposes.
- To assess and, where appropriate, approve prospective Foster-Carers within stipulated timescales.
- To provide a rigorous training and support programme in order that our carers can enhance their skills.

Objectives

The Department will ensure that the above aims are met through compliance with the specific objectives stated in:

- The Children and Families Bill 2014
- The Children Act 1989
- Every Child Matters 2004
- The Care Planning, Placement and Case Review (England) Regulations 2010
- The Care Standards Act 2000
- The Fostering Services Regulations 2011
- The Fostering National Minimum Standards 2011
- Amendments to Assessment and Approval of Foster Carers Guidance and Regulations and Statutory Guidance July 2013
- Amendments to Care Planning Regulations and Guidance July 2013
- Departmental Policies and Procedures, including the Placement Policy

2. Organisation and Facilities of the Fostering Service

(see Appendix 1 for detailed structure)

- Bromley's Fostering Service is part of its Education and Care Services, managed by Executive Director, Terry Parkin, and is the direct responsibility of the Assistant Director for Children's Social Care, Kay Weiss.
- Kay Weiss is supported by five Heads of Service (Youth Support, Referral & Assessment, Safeguarding & Care Planning, Quality Assurance – including the Safeguarding Board – and Care & Resources) and the Fostering Service comes under the remit of the Head of Care & Resources, Ian Leadbetter.
- The responsible person for the Fostering Service within Care & Resources is the Group Manager for Family Placement, Susan Noonan, supported by three Deputy Group Managers, Maggie Richardson, Sammy Forbes and Wenifred Marshall. They are responsible for ensuring delivery of the services detailed in the next section.
- The Fostering and Adoption teams jointly support a staff bank of qualified and experienced social workers in family placement work.
- The Fostering Service is based in Bromley's Civic Centre, in close proximity to other departments and teams to facilitate close partnership. Interview, meeting and training rooms are provided on the Civic Centre site.
- The Service is responsible for establishing, maintaining and servicing the Bromley Fostering Panel. The Panel, in carrying out its regulatory functions, makes recommendations to the Agency Decision Makers, Kay Weiss (Assistant Director for Safeguarding and Social Care Division) and Ian Leadbetter (Head of Care and Resources).
- The Family Placement Team makes use of other Council Departments, such as Finance, HR, IT, Customer Services, as required, to support planning, delivery, and monitoring of services. This includes databases & information systems etc used by the Family Placements Team, which are under continuous improvement to reflect the needs of the developing Service.
- The Service also has access to the Authority's Medical Officer and the Senior Solicitor, whose responsibilities include advising the Adoption and Fostering

Panels and offering advice and consultation to social work staff, other professionals and foster carers.

- The Fostering Service works in close partnership with:
 - the Children's Commissioning Team in identifying and meeting the placement needs of Bromley's Looked After Children.
 - other teams in Safeguarding and Social Care.
 - colleagues from other agencies and/or Departments such as Health, Education, CAMHS, Housing, Youth Justice etc
 - the Bromley Foster Care Association (BFCA) who represent the views of foster carers
 - the Living in Care Council (LinCC) which represents the views of Bromley's children and young people in care - the Children's Guide has been updated by the Living in Care Council (LinCC) and devised a template for foster carers to provide a Welcome leaflet for children coming to stay.

3. Services provided

Purpose of the Fostering Team

The Fostering Team is responsible for all the work undertaken with foster carers approved by the Department in order to:

- increase the number of in-house foster carers to a level that reflects the needs of **all** Bromley's children in care, including emergency, short-term and long-term placements, family and friends carers, children with disabilities and parent & child placements
- in particular, to develop services for family members and friends to act as foster carers for specific children, and positively encourage these placements
- recruit, approve and support foster carers as far as possible carers who reflect the racial and cultural origins of Bromley Looked After children.
- recruit and approve foster carers in Bromley or nearby so that the Fostering Service provided to Looked After children is local and causes minimum disruption to aspects of their life such as education and training.
- comply with all Fostering and Care Planning Regulations and Guidance (including July 2013 amendments) and Standards
- contribute to a decrease in the overspend in the children's placement budgets by providing an effective, efficient and local in-house service.
- provide a service which is anti-discriminatory and which promotes equality and inclusion

Services

- Advice and information on fostering, including providing a Duty System for the Department when referrals are made, and requesting placements for children
- Initial home visits by a fostering social worker to assess the motivation and ability of prospective carers to provide a safe caring environment for a child
- A Preparation and Training course delivering the Skills-to-Foster programme

- Comprehensive preparation and assessment for prospective foster carers, including specialist workers to develop and support Family & Friends Carers
- All assessments of prospective foster carers to be presented to the Fostering Panel for a decision on the recommendation to be put forward to the Department's decision maker within stipulated timescales.
- Provision of a Supervising Social Worker (SSW) to work in partnership with the child's social worker and foster-carer.
- An allocated social worker from the Fostering Team to family find for individual or sibling groups of children requiring permanency via long term fostering.
- Planned general and specific recruitment programmes for foster carers for individual and specific groups of children.
- Advice and information on services for foster carers to assist them in their care of children placed with them.
- Advice and information to other professionals working with children.
- Information sources including:
 - A new website (under construction)
 - Fostering Brochure for prospective applicants
 - Children's guides to the Fostering service
 - Information on Friends and Family care
 - Workbooks for foster carers undertaking the Skills to Foster and TDS Induction standards
 - Information for those attending the Fostering Panel
 - Fostering Handbook
 - Information for birth families.
- Attendance of fostering social workers with their foster carers at all Child Protection Conferences and LAC Reviews and Permanency Planning Meetings.
- Monthly Fostering Support Meetings, including a Black Carers Support Group. A new specialist Support Group for Family & Friends Carers is under development
- Training programmes for foster carers to achieve the TDS induction standards and thereafter to continually enhance and develop their skills , including opportunities for carers to undertake NVQ and other specialist training
- A quarterly newsletter.
- The Bromley Fostering Panel, which fulfils its statutory functions as required and offers advice and consultation to social work staff on fostering matters.
- Membership of the Fostering Network (including legal membership) and BAAF, and attendance at functions arranged by these agencies.
- Advocacy and Independent Visitor Services for foster-children.

4. Recruiting, Preparing, Assessing and Approving Prospective Foster Carers

Recruitment

- There is continuous recruitment for foster carers who can meet the needs of Bromley's looked after children. There is also targeted recruitment for specific age ranges and/or specific children needing foster placements. The Group Manager of Family Placements and Head of Service for Care and Resources plan and put into operation this strategy.
- The new website is under construction to attract more foster carers.
- Prospective applicants can dial a recruitment line; download information and an initial enquiry form from the web; email the Department, or attend an informal Information Session to progress their interest. These sessions are held so that prospective applicants can chat with experienced foster-carers and foster care staff about foster care and what Bromley offers.
- The Customer Service Centre manages all enquiries for information about fostering in Bromley and sends out information on request.
- The Fostering Team, via dedicated duty time, aims to respond to all enquiries within one day.

Assessment Stage 1

- If prospective applicants choose want to proceed from their enquiry, they are asked to make a formal application and receive an initial home visit by a fostering social worker. To speed up the process, references, Medical Reports, DBS checks and any other relevant information is concurrently sought by the Fostering Service.
- This stage is an initial mutual exploration of the tasks involved in fostering and the suitability of the applicants to perform them.
- From the information collated, the allocated social worker will complete an initial assessment and pass their written report to the Group Manager for Family Placement. If the latter confirms that the applicants have the motivation and experience, together with the space and time, to foster, they are asked to attend a Training and Preparation Group.
- Candidates can withdraw at any point but If they are not considered suitable candidates at this stage, the information is passed to the Agency Decision Manager to make a final decision. If they confirm that the applicants are not suitable, a letter informing them so must reach them within ten days of the final information to complete Stage 1 being received. The applicants can access Bromley's Complaints Process if they feel they have been treated unfairly.

Assessment Stage 2

- In many cases, where possible, this overlaps with Stage 1 in order to speed up the Assessment process.
- Preparation groups are run at least six times a year and are run on different days of the week, including weekends, to facilitate attendance.
- A mixture of fostering social workers, foster carers and young people from the care system present each Preparation Group. Comprehensive information is given to participants to ensure that they learn about all aspects of fostering.

- Staff and prospective foster carers complete evaluation forms and these are considered by the fostering workers and the Group Manager. The interaction of the carer during the preparation training is also considered.
- A comprehensive fostering assessment is undertaken using BAAF Form 'F'. All members of the household are seen individually as well as in a family group.
- Three personal references are sought, of which one can be a family member. Ex-partners are contacted in relation to an applicant's capacity to parent, if there have been any children from that relationship.
- The Form 'F' is shared with the applicant(s) so they can make corrections and observations on the report prior to it being submitted to Panel.
- The assessing social worker receives regular supervision throughout the assessment.
- If at any time during Stage Two, there are concerns about the suitability of participants, then a brief report will be presented to the Panel. If the Panel and the Agency Decision Manager confirm that the candidates are unsuitable, the candidates have the right to make representations to the Panel or to use the Independent Review Mechanism within 28 days if they feel they have been treated unfairly.

Approval

- The assessing social worker prepares the applicant(s) for attending the Bromley Fostering Panel.
- The Form F, together with any written observations or representations, is submitted by the assessing social worker to the Panel.
- The Panel's recommendations are then passed to the Agency Decision Maker who will make the decision within seven working days of the Panel.
- The decision is sent to the applicant(s) within 7 working days of it being made.
- If the Agency Decision is not to approve, the applicants are notified in writing, including the information that they have 28 days to make representations to the Panel or use the Independent Review Mechanism.

Timescales

A full assessment should be undertaken which allows the Panel to make their recommendation within eight months of the applicant's initial inquiry.

5. Support for Foster Carers

- Following approval, all foster carers will have an allocated Supervising Social Worker (SSW) who supports and supervises them.
- The SSW supports the foster carer by providing information about policy and procedures, relevant legislation and resources within and outside the Department.
- A child placed with foster carers also has an allocated social worker who offers support to the child and to the foster carers in their caring for the child.
- A range of fostering support services are made available to foster carers:
 - The SSW and the child's social worker will support the carer in every aspect of their task, including the impact of fostering on the wider family.
 - The SSW will undertake direct work with the child /children of the carer.

- Foster carers meet a minimum of six times a year in support groups. They can access the training programme set up for all workers in the Safeguarding and Social Care Division. In addition, specific training courses are run to enhance foster carers' skills.
- The SSW ensures that the foster carer meets all the standards of care set by the Department and is responsible for assisting the carer in the development of their competencies and their career as carers.
- There is a quarterly newsletter - and it is envisaged that the new website will provide approved carers a secure section for peer support.
- Access to the services of Medical and Legal Advisers is provided for advice, information and consultation, in addition to their specific roles and functions.
- Financial support — foster carers will be paid an allowance as stated in the current policy on payments. Additional payments are available for specific purposes and help may also be given for any specialist equipment required.
- Specialist therapeutic support to children and their foster carers through a specialist Looked After Children's CAMHS service.
- Specialist Education and Health teams.
- Assistance from the Fostering Service in ensuring that the views of the foster carer are heard in relation to care planning for a child in their care
- The Bromley Foster Care Association meets bi-monthly and is financially supported by the Department. The Department meets regularly with members of the Committee of the Association to ensure an effective working relationship is maintained.
- All Foster Carers have membership of the Fostering Network, including legal membership.

6. Complaints Procedure

Complaints Officer: CSC Complaints, 3rd Floor, Stockwell Building, Bromley, BR1 3UH Tel: 020 8461 7644

Email: cypsocialecomplaints@bromley.gov.uk

- All carers and applicants are given a copy of the Department's Complaints Procedure, 'Getting it Right' in case an occasion arrives when they feel they have been treated unfairly. However, we will always endeavour to reach a reconciliation with complainants before it becomes necessary to make a complaint.
- As described previously in the *Assessment Stage 2* and *Approval* sections, applicants who have completed Stage One of the Assessment but are subsequently not considered suitable as foster carers may also make representations to Panel or access the Independent Review Mechanism.

Education, Care & Health Services Children's Safeguarding & Social Care

Kay Weiss
Assistant Director
Safeguarding & Social Care
0208 313 4062

Paul King
Head of Youth Support
0208 313 7572

Mark Thorn
Head of Referral & Assessment
0208 461 7578/7086

Susan Phillips
Head of Safeguarding & Care Planning
0208 313 4026

Julie Daly
Head of Safeguarding Quality Assurance & Principal Social Worker
0208 313 4610

Ian Leadbetter
Head of Care & Resources
0208 313 4116

Helen Priest
Virtual Head Teacher for Children in Care
0208 313 4185

Elayne Stewart
GM YOT
0208 466 3080

Simon Harrison
GM Referral & Assessment
0208 461 7348

Charlotte Paraiwa
GM Emergency Duty Team
0208 313 4411

Rhonda Thom
GM Safeguarding West
0208 461 7021

Virginia Read
GM Quality Assurance
0208 313 4635

Lorriisa Webber
Lead Officer for Education
0208 313 4681

Sue Noonan
GM Adoption & Fostering
0208 313 3083

Jan Smith
GM Youth Prog. Mgr. (Targeted)
0208 466 3066

Rose Dēnis
Multi Disciplinary Adolescent Service
X 7417

Rachel Dunley
GM Bromley Children and Family Project
0208 461 7261

Paul Meggitt
GM Safeguarding East
0208 461 7355

Susan Webb
GM – QA Performance
0208 313 4552

Sarah Turner
Designated Nurse for Safeguarding
0208 313 4681

Andy Bravery
GM Looked After Children
0208 461 7861

Linda King
GM Youth Prog. Mgr. (Universal)
0208 466 3098

Gill Downton
GM CAF Team
0208 461 7174

Bernadette Roche
Court Pilot Manager
Care Proceedings Case Manager
0208 461 7342

Simon Plummer
Development Officer
B.S.C.B.
0208 461 7563

Tracey Rogers
Policy Officer
0208 313 4537

Graham Glazier
GM Leaving Care/ 16+
0208 313 4117

Jean Norton
WRL & BEBP Manager
0208 313 6252

APPENDIX 1 – STAFFING AND STRUCTURE page 2

Position or Role in the Agency	Hours per week	Name	Year of appointment to Fostering Service	Qualifications
Group Manager	36	Susan Noonan	2013	Dip SW, CQSE, PQ1, CMS, DMS
Panel Chair		Dr Helen Cosis-Brown		
Deputy Group Manager	36	Sammy Forbes (temp)	2013	
Deputy Group Manager	36	Margaret Richardson	2011	DipSW, PQ1, Practice teaching award, DipHE social work.
Deputy Group Manager	36	Wenifred Marshall		DipSW, DipHE applied social studies, PQSW,
SGO Officer	36	Deborah Brown	2009	BA Family & Child Care Studies/Diploma in Social Work
Senior Practitioner	36	Vacant	2004	
Senior Practitioner	36	Louise Matovu	2009	CQSW, BA(Hons) Applied SW, PQ Consolidation
Senior Practitioner (Acting)	36	Claudia Verwey	2010	BA social work Pq consolidation
Senior Practitioner	36	Angela Harrison	2004	BA (hons) Social Work, DipSW, PQ1
Senior Practitioner	14	Catherine Tulett	2003	MA in SW; PQ1
Senior Practitioner	36	Steve Thring	2003	DipSW; Dip Child Protection; PQ1 Dip HE (social services)
Senior Practitioner	28	Rena Gray	2006	NNEB, CSS 1985 Child Protection and Child Care studies, PQ1-PQ6 2002
Senior Practitioner	36	Sheila Delliston	2008	BA(Hons) Social science, CQSW, MA in Child Protection.
Supervising Social Worker	21	Susanna Reich	2010	BSc (Hons), MA/Dip SW, PQ Consolidation Module
Supervising Social Worker	36	Emily Dodds	2010	BSc(Hons) Applied Social Sciences, DipSW, PQ Consolidation
Supervising Social Worker	36	Rosa Sams	2013	
Supervising Social Worker	36	Godwin Munzara	2013	
Supervising Social Worker	36	Cheryl Medcalf	2013	
Supervising Social Worker (Connected Persons)	36	Christine Udebhulu	2014	
Supervising Social Worker (Connected Peraons)	36	Marion MaGeown	2014	
Panel Administrator	36	Bernadette Wilby	2012	
Team Administrator	36	Lynda Morton	2013	Temp post holders
Business Process Officer	36	Jody Malley	2012	BSc, PG Dip Environmental Sciences

APPENDIX 1 – STAFFING AND STRUCTURE page 3

Manager of the Fostering Service

Susan Noonan,

Family Placement Team,

St Blaise Building,

Civic Centre,

Bromley, BR1 3UH

Telephone: 020 8313 3083

Fax: 020 8313 4400

Email: Susan.Noonan@bromley.gov.uk

Relevant Qualifications: Dip SW, CQSE, PQ1, CMS, DMS

Adoption of the Statement of Purpose

The Statement of Purpose of the Fostering Service is contained and expanded within the Fostering Policies and Procedures.

The Policies and Procedures and the Statement of Purpose contained have been placed before Council members and fully endorsed and supported.

The Statement of Purpose will accompany the Annual Report of the Fostering Service and will be presented to the Portfolio Holder for Care Services.

APPENDIX 2 – QUALITY ASSURANCE

Tracking systems are in place to monitor timescales from initial enquiry to approval.

All Staff are supervised in accordance with the Divisional Supervision Policy and Management Standards. The Group Manager [Family Placements] is supervised on a regular, three-weekly basis by the Head of Service, Care and Resources and the Group Manager is currently responsible for ensuring the supervision of all social work staff in the Fostering Team on the same three-weekly basis, and other staff on a four-weekly basis.

Copies of the signed supervision notes are placed on the relevant file, with any agreed action noted.

The Group Manager is responsible for ensuring files are always seen, read and agreed for closure by a manager. In addition, files are read and signed on an occasional basis to assure quality. An audit form has been produced for this purpose

The Deputy Group Manager [Fostering] is delegated to be the Professional Adviser to the Fostering Panel and reads and signs all Forms 'F', the child permanency records and matching reports on foster carers and children.

The Chair of the Fostering Panel also quality assures the work of Panel, including the reports presented

A Panel feedback form is in use for applicants and foster carers attending Panel to collate comments on their experience of attending Panel

All foster carers are supervised and supported by an allocated Supervising Social Worker, and receive an unannounced visit.

Their approval is reviewed annually in partnership with them, the, child(ren)'s Social Worker, and Independent Reviewing Officer - if possible the foster child and birth parents contribute to this. The first annual review is presented to the Fostering Panel and subsequent reviews are presented to the Agency Decision Maker. Reviews are carried out sooner if there are concerns or issues the Fostering Panel should be made aware of.

An annual report with a six monthly update on fostering activity is produced and submitted to both the Care Services Portfolio Holder and the Fostering Panel.

In line with requirements, the Fostering Service will be inspected by Ofsted under the Care Standards Act 2000. OFSTED can also be contacted by carers who feel there are issues of concern which warrant their involvement. For details, see: www.ofsted.gov.uk/resources/concerns-and-complaints-about-social-care-providers.

Feedback from carers, children and birth parents is a crucial element of ensuring the service is effective and responsive, and consultation takes a number of formats: individually through the case planning process and to allocated social workers; feedback from training and support groups; via formal consultation exercises, and foster carers and children and young people's input into various working groups, questionnaires and consultation exercises.

Report No.
CS14068

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre-Decision Scrutiny by the Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: **ADOPTION SERVICE ANNUAL REPORT 2013/14**

Contact Officer: Kay Weiss, Assistant Director Safeguarding and Social Care
E-mail: kay.weiss@bromley.gov.uk

Ian Leadbetter, Head of Social Care, Care and Resources
E-mail: ian.leadbetter@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: (All Wards);

1. Reason for report

1.1 Standard 24.6 of the National Minimum Standards 2011 requires the Adoption Agency to submit reports to the Executive, to:

- Receive written reports of the management, outcomes and financial state of the agency
- Monitor the management and outcomes of the services in order to satisfy themselves that the agency is effective and is achieving good outcomes for children and/or service users
- Satisfy themselves that the agency is complying with the conditions of registration

1.2 The adoption agency is also required to update and publish its statement of purpose. The annual report of the Bromley Adoption Agency (appendix 1) and Statement of Purpose (appendix 2) are attached.

2. RECOMMENDATION(S)

2.1 The Care Services Policy, Development and Scrutiny Committee is asked to:

- i. Consider the content and comment upon the annual report of the adoption agency and revised statement of purpose;

ii. Recommend that the annual report and revised statement of purpose be endorsed by the Care Services Portfolio Holder

2.2 The Care Service Portfolio Holder is asked to endorse the annual report and updated statement of purpose.

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People:
-

Financial

1. Cost of proposal: No Cost:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: 833110
 4. Total current budget for this head: £1,048,670
 5. Source of funding: Base Budget
-

Staff

1. Number of staff (current and additional): 15fte
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement:
 2. Call-in: Applicable:
-

Customer Impact

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

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 The London Borough of Bromley is a registered adoption agency. The work of the Bromley Adoption Agency is governed by the Adoption and Children Act 2002 and is subject to the Adoption Agency Regulations (AAR) 2005, 2011, 2012, 2013 and the National minimum standards (NMS) 2011.
- 3.2 Local authority adoption services are no longer inspected by Ofsted independently. Adoption forms part of the new single assessment framework and adoption performance (as opposed to the work of the adoption service) is a separate judgment.
- 3.3 Standard 24.6 of the National Minimum Standards 2011 require the Adoption Agency to submit reports to the Agency executive, to:
- Receive written reports of the management, outcomes and financial state of the agency
 - Monitor the management and outcomes of the services in order to satisfy themselves that the agency is effective and is achieving good outcomes for children and/or service users
 - Satisfy themselves that the agency is complying with the condition of registration
- 3.4 The annual report of the Bromley Adoption Agency 2013/14 is attached as appendix 1.
- 3.5 The Agency is also required to update and publish a statement of purpose, outlining the work of the agency that is accessible to adopters, children, staff and members of the public.
- 3.6 The updated statement of purposes for 2014/15 is attached as appendix 2.
- 3.7 Adoption activity (2013/14) at a glance

Activity	Outcome	Notes
Number of enquiries	185	<i>153 enquiries in 2012/13</i>
Adoption information Sessions	10	<i>45 prospective adopter units attended</i> <i>6 sessions held in 2012/13</i>
Adopter Stage One Workshops run	4	<i>4 days in total / 13 prospective adopter units attended</i>
Adopter Stage Two preparation Groups run	5	<i>9 days in total / 14 prospective adopter units attended</i>
New adopters approved	18 <i>(*3 approved under new two stage process)</i>	<i>Also, 17 adoptive units were already in the pool from the previous year as at 1st April 2013</i> <i>14 adoptive units left in the pool as at 31st March 2014.</i> <i>14 new units approved in 2012/13</i>
New family finding referrals for children with an adoption plan	18	<i>40 other children were already awaiting to be found a match as at 1st April 2013</i> <i>19 children with an adoption plan and awaiting an adoption match as</i>

		<i>at 31st March 2014</i>
Children subject to Adoption Orders	14	<i>17 in 2012/13</i>
Children placed for Adoption	27	<i>7 of these children became subject to Adoption orders 20 were in pre-adoptive placements as at 31st March 2014. 10 children placed in 2012/13</i>
Adoption panel meetings	13	<i>44 cases considered (adopter and matching cases)</i>
Bromley adopters supported as part of inter-agency placements	11 <i>(16 children from other local authorities being placed)</i>	<i>7 adoptive units for placements started in the 2013/14 4 adoptive units for placements started in previous year</i>
Adoption support workshops for approved adopters	4	<i>4 days in total</i>
Letterbox contact arrangements in operation as at 31 st March 2014	439	<i>572 exchanges for 195 children 321 exchanges for 165 children in 2012/13</i>
Birth records counselling-new referrals from adopted adults	24	<i>59 in 2012/13</i>
Children in adoptive families where direct contact arrangements with birth families were in place as at 31 st March 2014	53	<i>56 in 2012/13</i>

4. LEGAL IMPLICATIONS

- 4.1 Standard 24.6 of the National Minimum Standards 2011 require the Adoption Agency to submit reports to the Agency executive.
- 4.2 Standard 18 of the National Minimum Standards 2011 require the Adoption Agency to Review, at least annually and publish its statement of purpose.

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

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**London Borough of Bromley
Education, Care and Health
Services
Children's Social Care**

**ANNUAL REPORT ON ADOPTION ACTIVITY
2013-2014**

CONTENTS:

1. Bromley Adoption Agency
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6. Profile of Adopters
7. National Adoption Standards Timescales
8. The Adoption Consortium
9. Recruitment and Preparation of Adopters
10. Inter-country Adoption
11. Adoption Support Services
12. Education Support
13. Post Adoption Contact
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15. Birth Records Counselling
16. Adoption Allowances
17. Training
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19. Disruptions
20. Complaints, Compliments, Allegations
21. Future Developments
22. Future Reports

1. BROMLEY ADOPTION AGENCY

- 1.1 The London Borough of Bromley is a registered Adoption Agency (known as Bromley Adoption Agency). The work of Bromley Adoption Agency is governed by the Adoption and Children Act 2002 and associated regulations, The Children and Adoption Act 2006 and associated regulations, and is subject to the Adoption Agencies Regulations (AAR) 2005, 2011, 2012, 2013 and the National Minimum Standards (NMS) 2011.
- 1.2 Adoption agencies are also subject to Ofsted inspections, the last inspection of the Bromley Adoption Agency was carried out in 2009 and the service was judged as 'good'.
- 1.3 This report sets out the structure, functions and the activity of the Adoption Agency during 2013 – 2014. It shows that adoption performance is good and is improving.

2. BROMLEY ADOPTION SERVICE

- 2.1 The Bromley Adoption Service is a borough wide service managed within the Social Care Division of Education, Care and Health Department. It has developed close links with other borough wide services and key stakeholders. The work of the Adoption Service contributes to improving outcomes for some of the most vulnerable children and young people in the borough.
- 2.2 The Adoption Service is responsible for all the adoption work undertaken within the Department. This involves domestic, inter-country and step-parent adoption; birth parent counselling; post placement and post adoption support and a range of intermediary services.
- 2.3 The Adoption Service, sits within the Education ,Care and Health Department and has an Adoption Assessment and Family Finding team and a Post-adoption Support team. The Adoption Service has a total of 11.0 FTE managerial and social work staff. Additionally the team has 2.0 FTE administrative staff who offer day to day business support to staff and also administer the letterbox contact arrangements and archiving of files.
- 2.4 The managerial and social work staff within the Adoption Service take lead responsibility for different aspects of the service, namely recruitment and preparation of prospective domestic adopters, family finding for looked after children with an adoption plan and adoption support services. The team provides a duty service for prospective adopters and offers consultancy on adoption matters to social workers from the Referral & Assessment, Safeguarding and Looked After Children Teams.

- 2.5 During 2013/14, due to Deputy Group Manager in Post- Adoption team remaining vacant, the Group Manager directly managed staff that have a dedicated role in providing post adoption support services including letterbox, support to direct contact arrangements and independent support to birth families affected by adoption. One of the adoption support senior practitioners in the team acted as nominated Adoption Support Services Adviser (ASSA) for the agency. Other adoption support senior practitioners in the team take a lead role in providing other services such as birth records counselling and adoption support work.
- 2.6 During 2013/14, the Deputy Group Manager- Assessment and Family Finding team acted as the Agency Adoption Adviser and directly managed the staff involved in family finding for children with an adoption plan, adopter recruitment, assessment and approval and supporting adopters post-placement / pre adoption order, Inter-country adoption and step-parent adoption assessments.
- 2.7 One of the adoption senior practitioners in the Assessment and Family Finding is the nominated Stage 1 Lead for adopter recruitment and training. Other team members take lead roles in providing other services such as inter-country and step-parent adoption.
- 2.8 The Adoption Agency Advisor plays a key role in ensuring the effective running of the Adoption Panel, providing a quality assurance role in relation to reports being prepared for panel and for providing specialist advice to staff within Safeguarding and Looked after Children Teams in relation to adoption work.
- 2.9 There have been significant & challenging legislative changes to the adopter approval process in the last year. The revised statutory Adoption Guidance issued in February 2011 and further amended in late April 2011 and again in July 2013, with a new Chapter 3 on work with prospective adopters, has framed the adoption work undertaken this year.
- 2.10 In order to implementing the new legislative framework, our agency have put new adoption assessment and approval processes in place and revamped all the forms, information packs and the format and frequency of the learning and training workshops to comply with the reduced timescales for adopters' training and assessment.
- 2.11 During 2013/14 Bromley continued to be a member of the South East Adoption Consortium. The Group Manager and the Deputy Group Manager attended the quarterly meetings of the Consortium Managers as well as representing Bromley at the British Association for Adoption and Fostering (BAAF) and London Councils quarterly meetings for adoption and fostering agencies.

2.12 During 2013/14 the adoption records were migrated onto CareFirst (locked down to the adoption agency to comply with the Adoption regulations). All team members were trained in using CareFirst. Managers have put in place CareFirst reporting arrangements to support improved performance monitoring.

3. CHILDREN WITH AN ADOPTION PLAN AND AWAITING A MATCH/PLACEMENT

3.1 As at the beginning of the financial year (**1st April 2013**), **40 children were subject to an adoption plan and waiting for an adoption placement**. Their plans for adoption were approved in the Adoption Panel and via the Agency Decision making mechanism which was brought into force in November 2012.

3.2 Out of the **40 children awaiting a placement** at the beginning of the financial year 2013/14, 27 children had their adoption plan approved in the year 2012/13 whilst the other 13 children had had their adoption plan approved in the previous year 2011/2012.

3.3 Out of the cohort of 40 children, **5 children had significant levels of special needs**, with three of them being case managed in the Children with disabilities team.

3.4 In terms of the children's ethnic background, out of the 40 children:

- 32 were of White British heritage
- 3 of other White background
- 3 of mixed White and Black Caribbean heritage
- 1 of mixed White and Black African heritage
- 1 of Black African heritage

3.5 **In the cohort of 40 children, there were:**

- **6 sibling groups of two** (12 children)- where the siblings required a placement together
- **2 sibling groups of three** (6 children)- where the siblings required two separate placements (2+1) due to children's varying needs
- **1 sibling group of four** (4 children) requiring a placement together
- **18 individual children**

3.6 A Further **18 children** became subject to Adoption plans in 2013/2014;

In the cohort of 18 children, there were:

- **2 sibling groups of three** (6 children)- where the siblings required a placement together
- **12 individual children**

3.7 In terms of the **children's ethnic background**, out of the 18 children:

- 10 were of White British heritage
- 6 of mixed White and Black Caribbean heritage
- 1 of other White background
- 1 of Black British heritage

3.8 In terms of **children's age**, the youngest child in the cohort of 18 was aged 5 months at the time the decision for adoption was made and the eldest child in the cohort was aged 8.

3.9 Of the **total of 58 children with an adoption plan and awaiting an adoption placement** we worked with during the year 2013/14 (18 new decisions and 40 carried over from 2012/13):

- **26 children were matched with an adoptive family** during the year 2013/14 (of which 25 children were also placed with their adopters during the year and 1 child was awaiting placement as on 31st March 2014)
- **13 children had their adoption plan rescinded** during 2013/14 as follows:
 - 8 plans were rescinded where Court did not make the placement Order (1 sibling group of four, one sibling group of three and 1 individual child)
 - 4 plans were rescinded as these were historical cases where the Court did not grant the Placement order or the child's care plan had changed and the adoption plans for the children had not been rescinded
 - 1 plan rescinded as child's had achieved permanency through long term fostering
- **19 children were actively being found an adoption placement** as at 31st March 2014.

3.10 At the end of the financial year 2013/14 (*31st March 2014*), a number of **19 children** were subject to an adoption plan and awaiting to be found an adoption placement. These were carried over onto the year 2014/15.

3.11 **In the cohort of 19 children, there were:**

- **1 sibling group of three (3 children)** where the siblings require a placement together
- **16 individual children**- these includes 8 children who were originally are part of sibling groups and for which, due to their competing needs, family finding had to be sought for them individually

3.12 In terms of **children's ethnic background**, out of the 19 children:

- 11 were of White British heritage
- 4 of other White background
- 3 of mixed White and Black Caribbean heritage
- 1 of Black British heritage

4. CHILDREN MADE SUBJECT TO ADOPTION ORDERS

4.1 **Fourteen** children were made **subject to Adoption Orders in 2013/14**. This was a decrease from seventeen who were subject to Adoption Orders in the previous year. The decrease is accounted for by court delays and delays in the legal process and completion of the required Court reports.

4.2 A new process has been agreed between the Adoption and the Looked after Children teams and our legal department in order to avoid unnecessary delays in the future. Performance is being monitored by managers.

4.3 **Out of the 14 children subject to an Adoption order:**

- 2 were sibling groups of two (4 children) and 10 were individual children
- 7 children were placed with adopters within the same financial year, 2013/14 and 7 were placed with adopters in the preceding year 2012/13
- 3 children had significant level of special needs and were adopted by their foster carers (1 sibling group of two and 1 individual child)

4.4 In terms of the **children's age**, out of the 14 children:

- 6 children were aged 12-23 months
- 6 children were aged 2 to 5 years
- 2 children were older than 5 years

4.5 Out of the 14 children, the eldest child was aged 9 at the time the Adoption order was granted and the youngest child was aged 14 months.

4.6 In terms of **children's ethnic background**, out of the 14 children:

- 10 were of White British heritage
- 2 were of Asian / British/ Bangladeshi
- 1 of Black British Caribbean heritage
- 1 of Mixed - White/Asian

5. CHILDREN PLACED FOR ADOPTION IN 2013/14

5.1 There were **27 Bromley looked after children placed with prospective adopters during the year**. This was an increase by 17 comparing to the previous year.

5.2 In the cohort of **27 Bromley children placed with adopters**, there were 6 sibling groups of two (**12 children**) and **15 individual children**

5.3 **Out of the 27 children placed:**

- **16 children** were placed with in-house Bromley adopters; this included 4 of the sibling groups of two (8 children)
- **4 children** were placed with Consortium approved adopters
- **3 children** were placed with other local authorities' approved adopters under inter-agency agreements; this included one of the sibling groups of two
- **1 child** was placed with Voluntary Adoption Agency (VAA) approved adopter
- **3 children** were placed for adoption with their foster carers

5.4 In terms of **children's ethnicity**, out of the 27 children placed with adopters:

- 23 were of White British heritage
- 1 of mixed White and Black Caribbean heritage
- 1 of mixed White and Black African heritage
- 1 of Black British heritage
- 1 of Black British Caribbean heritage

- 5.5 Out of the 27 children placed in the year 2013/14, a sibling group of two had been matched to their adopters in the preceding year 2012/13 with their placement taking place in the year 2013/14.
- 5.6 **Out of the 27 children placed in the year 2013/14:**
- **7 children** were granted the Adoption order during the year
 - **20 children were in their pre-adoptive placements as 31st March 2014** and we are working with them and their adopters to ensure they achieve permanency through adoption order in 2014/15
- 5.7 A further number of **9 children** (2 sibling groups of two and 5 individual children) from other local authorities were placed with **7 of our Bromley approved adopters** during 2013/2014 as part of inter-agency agreements.
- 5.8 Four out of the nine children were placed by our Consortium partner agencies and two out the nine children were granted an Adoption Order during the financial year.

6. PROFILE OF ADOPTERS

- 6.1 The number of **adopters approved during the year was 18 units** which was an increase by four compared to the previous year.
- 6.2 Out of the 18 adopter approvals, three of these completed the assessment and approval process under the new Two Stage process which came into force on 1st July 2013.
- 6.3 There were also a number of **17 units approved adopters as at 31st March 2013 awaiting for a match**; these were carried over into 2013/14.
- 6.4 The **ethnicity** of the total pool of 35 adoptive units (new approvals and carried over from the previous year) was:
- 45 White/British
 - 7 Other White background
 - 2 Black Caribbean
 - 6 Black African
 - 2 Asian Indian
 - 1 White Irish
- 6.5 The **relationship status** of total pool of 35 adoptive units (new approvals and carried over from the previous year) was:

- 7 single adopters
- 27 heterosexual couples
- 1 same sex couple

6.6 Out of the **total pool of 35 adoptive units** (new approvals and carried over from the previous year):

- **12 adoptive units were matched and placed in-house** with 16 Bromley children
- **4 adoptive units were matched and placed with 4 children** from our **Consortium** partners
- **3 adoptive units were matched and placed** with 5 children from **other local authorities from the UK** (2 sibling groups of two and 1 individual child)
- **1 adoptive unit was matched to a Bromley child** at panel with the placement planned to take place in the year 2014/15
- **1 adoptive unit was de-registered** at panel as no longer meeting the adoption regulation requirements to be an approved adopter
- **14 adoptive units** were left in our pool of approved adopters as at 31st March 2014; these were **carried over into the 2014/15** financial year

6.7 During the year 2013/14 the Assessment and Family Finding team have also supported **4 Bromley adopters** who have had **7 children** (3 sibling groups of two and 1 individual child) placed with them in the previous year through inter-agency agreements. All but one sibling group of two were granted an Adoption Order by 31st March 2014.

6.8 The new inter-agency placements started in the year and the adopter support inter-agency placements supported in the team during the year 2013/2014 have generated an income of £129,380.17.

6.9 There were **six** new initial step-parent adoption enquires in 2013/14.

7. NATIONAL ADOPTION STANDARDS TIMESCALES

7.1 The Adoption Agency is required to monitor its performance against a range of timescales. The timescales relate to the decision to place a child for adoption, assessing and approving prospective adopters and the proposal to place a child with particular adopters.

7.2 Scorecards were introduced as part of a new approach to address delays in the adoption system, as set out in [‘An action plan for](#)

[adoption: tackling delay](#)'. These scorecards allow local authorities and other adoption agencies to monitor their own performance and compare it with that of others.

7.3 Out of the **fourteen children subject to Adoption Orders**, a number of nine (**64%**) were **placed with adopters within the 12 months of approval of their adoption plan**.

7.4 **Adoption Scorecards:**

A1. The average time taken from entering care to moving in with adopters in days- the scorecard threshold indicator is 547 days.

Our agency scorecard in relation the above 14 children is 559

A2. The average time from Placement Order being granted to being matched in days- the scorecard threshold indicator is 152 days.

Our agency scorecard in relation the above 14 children is 230

A3. The number and percentage of children taking less than 20 months from entering care to moving in with adopters.

Our score card is: 9 children took under 20 months from entering care to moving in with adopters = 64.3%

7.5 Of all the **18 adoptive families** who were approved during the year

- **1 unit had waited between 3-6 months** between the date of their application and the date of their approval decision,
- **16 units waited between 6 - 12 months** between the date of their application and the date of their approval decision,
- **1 unit waited between 12 + months** between the date of their application and the date of their approval decision,

8. THE ADOPTION CONSORTIUM

8.1 The South East Adoption Consortium comprises Bexley, Medway, Bromley, Brighton and Hove, East Sussex and Kent. The consortium aims to maximise placement choice for children and to minimise delay in family finding across the consortium authorities by sharing prospective adopters.

8.2 The quarterly management meetings attended by the Adoption Group Manager and Deputy Group Manager are used to clarify and develop policy and practice issues across the consortium. The sharing of local practice guidance and procedures facilitates good working relationships and avoids duplication of work across the consortium. A

key theme of the discussions during 2013/14 has been the implementation of the new Two Stage assessment process and the planning of Consortium Adoption Activity Days in partnership with British Association for Fostering and Adoption (BAAF).

- 8.3 Approved adopters are added to the consortium database after their approval thus ensuring that family finding workers have access to a wider pool of adopters for the children they are finding families for.
- 8.4 There have been practitioner meetings during 2013/14 where social workers meet to discuss issues related to adoption practice.

9. RECRUITMENT AND PREPARATION OF ADOPTERS

- 9.1 The Adoption Service received **185** enquiries to the duty service throughout the year.
- 9.2 **Ten** Information session evenings were held throughout the year (this was an increase by 4 compared to the previous year). The sessions were run together with two of our South East Adoption Consortium partners (London Borough of Bexley and Medway Council) and were all attended by prospective adopters (**45** Bromley prospective adopter units attended in total).
- 9.3 The Information events received considerable support from Bromley's experienced adopters offering prospective adopters an opportunity for individual discussion and learning from their adoption experience.
- 9.4 The Adoption Assessment and Family finding team held **four sets of preparation groups** during 2013/14 (this was an increase by one set compared to the previous year). **Fourteen Bromley prospective adopter units** attended in total. Three of these sets of training (of 2 days each) were run in partnership with London Borough of Bexley and Medway Council as part of the new Two Stage Assessment and Preparation process.
- 9.5 A further **four sets of Stage 1 Workshops on Attachment and Loss** (of 1 day each) were run in partnership with London Borough of Bexley and Medway Council. **Thirteen Bromley prospective adopter units attended in total.**
- 9.6 Our Recruitment Strategy aims to secure the approval of sufficient prospective adopters to respond to the anticipated needs of Bromley children requiring adoption in the immediate future, and as part of the national shortage of adopters.
- 9.7 During 2012/13, the Assessment and Family finding team continued to strive towards recruiting more adopters for older children and sibling groups. These two areas remained a priority for the recruitment target

for 2013/14, putting more energy into focusing on current children waiting for adoptive families and children who are in the early stages of the adoption planning process. By focusing on these specific areas of recruitment, the Adoption Team ensured that any purchase of inter-agency placements was targeted on the 'harder to place' child.

- 9.8 Bromley have recruited families who live outside of the borough as well as families who live in the borough during the year 2013/14. However out-of-borough placements are in most cases more suitable for Bromley children with an adoption plan as opposed to in-borough placements as to reduce the possibility of members of the birth family coming in contact with adopted children or establishing their whereabouts.

10. INTERCOUNTRY ADOPTION

- 10.1 The Adoption Team is responsible for providing a service to people living within the borough that wish to consider inter-country adoption. Through membership of the Inter-country Adoption Centre (IAC) additional information on inter-country adoption; preparation groups for first and second time adopters and training is provided.
- 10.2 During 2013/14 there **were three country specific enquiries** about inter-country adoption which resulted in initial interviews but did not lead to any further assessments. Each country specific enquirer must be given up to date advice and information about their chosen country. This must be researched as criteria for applicants can change. In addition to country specific enquiries, general enquiries about the Inter-country adoption process were addressed, including statistical enquiries for the Department for Education (DfE).
- 10.3 Our adoption service is also responsible for providing support to applicants waiting for a match. Support was given to one adopter awaiting a match from China during the year 2013/14. This adopter subsequently withdrew as an inter-country adopter due to changes in her circumstances and was de-registered at adoption panel and removed from the DfE list of inter-country adopters.

11. ADOPTION SUPPORT SERVICES

- 11.1 Since the implementation of the Adoption and Children Act 2002 and Adoption Support Services Regulations 2005 there has been a legal duty on the local authority to provide adoption support services to both adoptive families, adopted children, adopted adults and birth relatives.
- 11.2 There has been an ongoing increase in the demand for such services, as well as an increase in the complexity of such cases.

- 11.3 There have been additional stresses placed on the adoption and post adoption support services due to a lack of capacity within the local CAMHS services to meet demand of specialist adoption focussed therapeutic input to adopted children and their families. Children who are looked after have priority if they meet the criteria for a service. Once adopted, the families must meet the criteria for the general CAMHS service. This area of need has been raised locally with health commissions and also at the London Adoption Board Strategic and Operational groups
- 11.4 All the staff within the Adoption Team is involved in some way with adoption support cases including contact work, work with adopted adults and adoption support undertaken by assessing social workers immediately post-placement.
- 11.5 The service also provides a duty service to respond to enquiries from adoptive families. These may be from Bromley adopters, adopters from other agencies living in the borough or adopters that have relocated into the borough. Some enquiries involve signposting to other services whilst others involve a more intensive assessment of adoption support services.
- 11.6 The post-adoption support team delivered four and co-presented one developmental workshops during 2013/14 and it is envisaged this will increase in 2014/2015. The annual picnic event was held in the summer which was attended by 180 adults and children from adoptive families.
- 11.7 Our agency has embedded the *Adoption Passport: A Support Guide for Adopters* in the adopter information, preparation and support work (a copy of the Adoption Passport is included in the Adoption Information pack). The Passport sets out the support services adopters can expect including:
- Paid adoption leave at similar rates to maternity and paternity leave
 - Priority access to social housing, and access to additional support to cover a spare room whilst adopters wait for their child to arrive in their new home;
 - Priority admission for school places, including Academies and Free Schools
 - A range of adoption support services , including access to counseling, information and advice for both adoptive parents and birth parents.
 - Access to in house training workshops to assist adopters to meet the needs of their adoptive children.
 - Financial support, priority access to social housing and social activities for adoptive families.

- It is a statutory duty to undertake Post Adoption Needs Assessment when requested.

12. EDUCATION SUPPORT

- 12.1 Support to adopters around education comes from the Looked After Children Virtual School and from Bromley's Parent Partnership worker.

13. POST ADOPTION CONTACT

- 13.1 Almost all children being placed for adoption retain some form of contact with their birth families and the Adoption & Children Act 2002 emphasises the importance of supporting such arrangements. This area of work continues to be a significant pressure for the service and one which merits a high level of input as contact managed well can be a critical factor in the successful placement and emotional well-being of the adopted child. It is clear that arrangements for contact have to be kept under review and may need to change and adapt as the child gets older or if there are significant changes within the birth family network.
- 13.2 As at 31st March 2014, **439** letterbox contact arrangements were in operation with 572 exchanges for **195** children. The letterbox coordinator provides the initial point of contact for information, advice and support to all those involved in this indirect contact between adopted child and their birth families. If counselling or intensive support is required they will be allocated for further work.
- 13.3 During 2013/14, the service worked with **53** children in adoptive families where direct contact arrangements with birth families were in place. The contact was mostly with siblings, but there is an increase in the number of direct contact arrangements involving both birth parents and grandparents. Each child will have one, two or more direct contacts annually with one or more parties, total currently 90 contacts. These arrangements continue until the child is 18 or until either party requests a review of arrangements.

14. WORK WITH BIRTH FAMILIES

- 14.1 It is the responsibility of local authority adoption agencies to ensure that birth families affected by adoption have access to independent advice, information and support when the plan for the child becomes adoption. This is provided in Bromley through referral to the adoption support team.
- 14.2 The take up of this service is low and this reflects the fact that birth families are often still in dispute with the local authority about the plans for adoption at the time they are referred. Birth families are also

provided with details of agencies who can offer support other than the local authority but experience suggests that some birth family members only feel able to take up this type of support sometimes years after the adoption has concluded.

- 14.3 The Adoption and Children Act 2002 introduced the provision of an access to information and intermediary service for birth relatives of adopted adults (to complement that existing for adult adoptees) which would trace the adoptee and seek their views on contact. The Adoption Team have limited resources to meet the needs of this service and volume is being carefully monitored to establish demand.
- 14.4 Any birth relative who requests an intermediary service is provided with support and advice and their details are added to the allocation list. There were five such enquiries in 2013/2014.

15. BIRTH RECORDS COUNSELLING

- 15.1 The local authority has a legal responsibility to provide a birth records counselling service, and an access to information (ATI) service, which may lead to an intermediary service and possible reunion. There were **24** new referrals from adopted adults during 2013/14. The waiting time has significantly reduced to two months in 2013/14 for this service although people adopted before 1975 are given priority because of the possible age of their birth parents if they wish to locate them. The adoption support senior practitioners take the lead role in providing this service.

16. ADOPTION ALLOWANCES

- 16.1 The total expenditure on Adoption Allowances during 2013/14 was £398,135. This was primarily to pay regular adoption allowance payments in relation to adopted children. There were in addition one-off payments made towards the costs of introductions and settling in expenses.

17. TRAINING AND CONSULTANCY

- 17.1 Staff within the service were involved in delivering information sessions for prospective adopters or post adoption support training to approved adopters. Follow up training for newly approved adopters on attachment, contact, and explaining adoption to children was also delivered by team members. Specific guidance and advice has been provided to the Safeguarding teams and LAC team staff on the preparation of child's permanence reports and permanency planning.
- 17.2 During 2013/14 the adoption team has attended 39 Permanency Planning Meetings held by the Safeguarding teams and Looked After

Children team and also offered consultancy and advice on adoption issues on .

- 17.3 All Adoption Team members have access to relevant training in order to maintain and update knowledge and skills.

18. ADOPTION PANEL

- 18.1 It is the responsibility of the service to ensure the effective running of the Panels. The Agency Advisor is responsible for effective operation of the Adoption Panel, agenda setting, the quality assurance of panel papers and takes a lead in the recruitment of panel members. Panel contributes significantly to the positive work of the Safeguarding and Social Care Division in planning for children and providing a key quality assurance role.
- 18.2 The Bromley Adoption Panel has met 13 times throughout 2013/14 and heard and made recommendations on a total of 44 cases (this includes adopter and matching cases).
- 18.3 The Panels have met as planned and have been quorate. Panel is kept up to date with practice and legal developments by the advisors to Panel.
- 18.4 During 2013/14 the service has ensured that Panel members' records are maintained to National Minimum Standards, and that all members of the panel benefited of training, have been subject to an annual review and that their DBS checks were current. We have also reviewed the Adoption panel Central list and recruited four new panel members: adopter, birth-parent and social work representatives to comply with current Adoption Agencies Regulations.
- 18.5 During 2013/14 the adoption panel have developed and implemented good practice and quality assurance tools- for example adoption panel feedback and quality assurance forms.
- 18.6 The Panel also established Foster Carer attendance. Their contribution was extremely valued at panel in 2013/14, informing the decision making process in matching cases.
- 18.7 Designing and adoption panel leaflet remains an area of development for the year 2014/15.

19. DISRUPTIONS

- 19.1 No placement disrupted during 2013/14 prior to the final adoption order being made.

20. COMPLAINTS/COMPLIMENTS/ALLEGATIONS

- 20.1 There were no complaints received by the Adoption Team in 2013/14.
- 20.2 No allegations of misconduct against staff nor allegation relating to child protection against adopters were received during the year.

21. FUTURE DEVELOPMENTS

- 21.1 In January 2014, Bromley adoption agency, together with two of our Consortium partners (Bexley and Medway) entered a partnership with "After Adoption" to provide the SafeBase parenting programme as part of a planned adoption support strategy to benefit children placed for adoption by the three local authorities. Bromley will be able to access support for seven adoptive families through the SafeBase Parenting Programme each year for the three years (concluding 31 January 2017).
- 21.2 Adoption Activity Days are an innovative addition to the existing range of family finding and matching practices and allow for adopters to directly meet a range of children waiting to be adopted in a prepared, supported, safe and fun environment. During 2013/14 Bromley adoption agency, together with four Consortium partners (Bexley, Medway, East Sussex and Brighton & Hove) worked in partnership with BAAF to facilitate three *Adoption activity day* events to benefit children from consortium. Two events were planned for 204/15 and one in spring 2015.
- 21.3 An area of development for our Adoption and Fostering Service for 2014/15 to ensure local policies and procedures are in place to enable and support **Foster to Adopt** placements.
- 21.4 The new adoption statutory guidance places a greater emphasis on reducing the length of time children wait for adoption matches/placements. **Foster to adopt** was introduced from 1st July 2013 which has its advantages and challenges. *Fostering for Adoption* places a child, during the period of temporary local authority care, with adopters who are also approved as foster carers. If the court then agrees that the child should be adopted and the adoption agency approves the 'match' between the carers/ adopters and the child, the placement becomes an adoption placement.
- 21.5 An analysis of our enquiries in the financial year 2013/2014 suggest that the largest number of enquiries were generated via the website.

- 21.6 Reviewing and updating our adoption pages on Council's website remains an area of development for 2014/15. The website appears to be the first place many enquirers access to find out information for adoption and its current design/ pages on adoption do not fully support Bromley's adoption recruitment drive.

22. FUTURE REPORTS

- 22.1 Standard 25.6 of the National Minimum Standards 2011 requires the Adoption Agency to produce a six monthly report on adoption activity to the Agency Executive, to:
- Receive written reports on the management, outcomes and financial state of the agency
 - Monitor the management and outcomes of the services in order to satisfy themselves that the agency is effective and is achieving good outcomes for children and/or service users
 - Satisfy themselves that the agency is complying with the conditions of registration.
- 22.2 Arrangements are in place that a report be presented to the Executive Working Party for Safeguarding and Corporate Parenting on a six monthly cycle with an annual report being presented to the Care Services Portfolio Holder following scrutiny by the Care Services PDS.
- 22.3 In addition, it is a requirement under standard 18.3 of the National Minimum Standards that the Adoption Agency approves and annually reviews the Statement of Purpose and children's guides. The annual report to the Portfolio Holder following scrutiny by the Care Services PDS will satisfy this requirement.



Bromley Adoption Service

Statement of Purpose

2014/15



CONTENTS

1. Mission, Values and Aims of the Local Authority in relation to the Adoption Service
2. Procedures for recruitment, preparing, assessing, approving and supporting prospective Foster Carers
- 3 Matching and Support
- 4 Summary of Complaints Procedure
- 5 Miscellaneous

APPENDIX 1: STAFFING AND STRUCTURE

APPENDIX 2: QUALITY ASSURANCE



The National Minimum Standards for Adoption set out the requirement for adoption agencies to compile a statement detailing what services are provided, the governing principles and who manages and provides the services. The statement of purpose is for: Children and young people, Birth relatives, Prospective and approved adoptive families, Social workers working within Bromley and other authorities, Councillors, Adoption Panel members, Office for Standards in Children's Services, Department of Education (Ofsted) and members of the public.

1. Mission, Values and Aims of the Local Authority in relation to the Adoption Service

1.1 Mission Statement

We believe that every child has the right to a permanent, secure and loving family which embraces their individual needs and differences and promotes their culture and identity. We strive to achieve this through providing a responsive and effective service to individuals and families from all backgrounds, involved in and affected by adoption. Our involvement continues beyond the making of an Adoption Order and to all parties affected by adoption.

1.2 Values

Our Adoption Service shares the values and principles that underpin the National Minimum Standards for Adoption.

Values – Children



- The child's welfare, safety and needs are at the centre of the adoption process.
- Adopted children should have an enjoyable childhood, and benefit from excellent parenting and education, enjoying a wide range of opportunities to develop their talents and skills leading to a successful adult life.
- Children are entitled to grow up as part of a loving family that can meet their developmental needs during childhood and beyond.
- Children's wishes and feelings are important and will be actively sought and fully taken into account at all stages of the adoption process.
- Delays should be avoided as they can have a severe impact on the health and development of the children waiting to be adopted.
- A sense of identity is important to a child's well-being. To help children develop this, their ethnic origin, cultural background, religion, language and sexuality need to be properly recognised and positively valued and promoted.
- The particular needs of disabled children and children with complex needs will be fully recognised and taken into account.

- Where a child cannot be cared for in a suitable manner in their own country, inter country adoption may be considered as an alternative means of providing a permanent family.
- Children, birth parents/guardians and families and adoptive parents and families will be valued and respected.
- A genuine partnership between all those involved in adoption is essential for the NMS to deliver the best outcomes for children; this includes the Government, local government, other statutory agencies, Voluntary Adoption Agencies and Adoption Support Agencies.

Values - Adopted Adults and Birth Relatives

- Adoption is an evolving life-long process for all those involved - adopted adults, and birth and adoptive relatives. The fundamental issues raised by adoption may reverberate and resurface at different times and stages throughout an individual's life.
- Adopted people should have access to information and services to enable them to address adoption related matters throughout their life.
- Agencies have a duty to provide services that considers the welfare of all parties involved and should consider the implications of decisions and actions for everyone involved.
- Agencies should seek to work in partnership with all parties involved, taking account of their views and wishes in decision-making.
- Agencies should acknowledge differences in people's circumstances and establish policies that provide non-discriminatory services.
- Adopted adults have their adoptive identity safeguarded and the right to decide whether to be involved in contact or communication with birth family members.

The Welfare Checklist

Section 1 of the Adoption and Children Act 2002 provides that whenever a court or adoption agency is coming to a decision relating to the adoption of a child, it must have regard to the following matters (among others)

- a. The child's ascertainable wishes and feelings regarding the decision (considered in the light of the child's age and understanding),
- b. The child's particular needs
- c. The likely effect on the child (throughout his life) of having ceased to be a member of the original family and become an adopted person
- d. The child's age, sex, background and any of the child's characteristics which the court or agency considers relevant,
- e. Any harm (within the meaning of the Children Act 1989) which the child has suffered or is at risk of suffering,

- f. The relationship which the child has with relatives and with any other person in relation to whom the court or agency considers the relationship to be relevant, including -
- i. The likelihood of any such relationship continuing and the value to the child of its doing so,
 - ii. The ability and willingness of any of the child's relatives, or of any such person, to provide the child with a secure environment in which the child can develop, and otherwise to meet the child's needs
 - iii. The wishes and feelings of any of the child's relatives, or of any such person, regarding the child.

1.3 Aims

The Service will aim to:

- provide a high quality adoption recruitment, assessment and support service where all people making contact with the service are responded to promptly and treated courteously and fairly and be given equal consideration in line with the policy and principles set out in the Council's Equal Opportunities Policy Statement
- provide a comprehensive adoption recruitment, assessment and support service in co-operation with other Council Departments; The South East Adoption Consortium (SEAC) Partner Agencies; Voluntary Adoption Agencies; local Adoption Support Agencies; the local Health Authorities; other key stakeholders and service users and to ensure there is a coherent local service to meet identified needs
- provide a comprehensive adoption recruitment, assessment and support service to meet the needs of children, birth families, adoptive parents and adopted adults which will be planned and delivered in conjunction with key partners and stakeholders and service users
- ensure that the needs, wishes and safety of the looked after/adopted child/adopted adult are at the centre of the adoption process
- as far as is reasonably possible, to provide practical support and services which will enable the child to return to, or remain with his/her family of origin where this is being requested, except in those circumstances where it is considered that it would be detrimental to the child's welfare due to issues of significant harm
- provide a pool of good quality adopters, reflecting the diverse needs of children who need adoptive families
- offer a comprehensive recruitment, training and support package to adopters
- provide a service that ensures the safety and well being of Looked After Children
- minimise potential risks by ensuring appropriate checks and reviews are in place and quality assurance is monitored through a comprehensive complaints process
- ensure that decisions are made with the 'best interests' of the child being paramount

- ensure that the welfare of children placed for adoption is promoted in relation to the need for stability and to ensure that health and education needs are met
- ensure that prospective adopters have access to all relevant information about the child and their history
-

1.4 Objectives

The Department will ensure that the above aims are met through compliance with the specific objectives stated in:

Acts:

- The Children and Families Act 2014
- The Children and Young Persons Act 2008;
- The Adoption and Children Act 2002;
- The Children Act 1989;
- The Care Standards Act 2000;
- The Children Act 2004;
- The Children Act 2008;
- The 1976 Adoption Act - Section 14;
- The Mental Capacity Act 2005;
- The Human Rights Act 1998;
- Data Protection Act 1998;
- Freedom of Information Act.

Statutory Instruments:

- The Adoption Agencies Regulations 2005; 2011, 2012, 2013
- The Adoption Support Services Regulations 2005;
- The Suitability of Adopters Regulations 2005;
- The Restriction on the Preparation of Adoption Reports Regulations 2005;
- The Independent Review of Determination (Adoption) Regulations 2005;
- The Adoption Agencies and Independent Review of Determinations (Amendment) Regulations 2011;
- The Local Authority (Adoption) (Miscellaneous Provisions) Regulations 2005;
- The Family Procedure (Adoption Rules) 2005;
- The Adopted Children and Adoption Contact Registers Regulations 2005;

- The Adoption Information and Intermediary Services (Pre-Commencement Adoptions) Regulations 2005;
- The Disclosure of Adoption Information (Post Commencement Adoptions) Regulations 2005;
- The 1983 Adoption Agencies Regulations - Section 15;
- The Adoption and Children (miscellaneous amendments) Regulations 2005;
- The Voluntary Adoption Agencies and the Adoption Agencies (Miscellaneous Amendments) Regulations 2003;
- The Adoptions with a Foreign Element Regulations 2005;
- The Adoption (Bringing Child(ren) into the United Kingdom) Regulations 2003;
- The Registration of Foreign Adoptions Regulations 2003;
- The Care Planning, Placement and Case Review (England) Regulations 2010;
- The Intercountry Adoption (Hague Convention) Regulations 2003;
- National Care Standards Commission Regulations 2003 - England;
- The United Nations Convention on the Rights of the Child.

Government Guidance

- Adoption Guidance 2011; 2014
- IRO Handbook: Statutory Guidance 2011;
- Practice Guidance - Preparing and Assessing Prospective Adopters (2006);
- Practice Guidance on Assessing the Support Needs of Adoptive Families (2008);
- Practice Guidance on Adoption: Access to Information and Intermediary Services;
- Working Together to Safeguard Children (and associated child protection guidance);
- The Children Act 1989 Guidance Volume 2: Care Planning, Placement and Case Review 2010;
- Family Procedure (Adoption) Rules 2005;
- Adoption and Children Act 2002 Practice Directions;
- The Court Rules, Domestic Adoption and Placement for Adoption 2002;
- Framework for the Assessment of Children in Need and their Families;
- Care Matters - Time for Change 2007.

Standards:

- Adoption National Minimum Standards 2011;

- Fostering National Minimum Standards 2011.

1.5 Facilities of the Adoption Service

1.5.1. The Adoption Service is provided through qualified staff from within the Adoption and Fostering Service, Education and Care Services Department. The Safeguarding and Looked after Children teams are based on the same floor, at St. Blaise building, Civic Centre in Bromley

1.5.2. The Adoption Service has access to the Authority's Medical Adviser and the Senior Solicitor within Legal, Democratic & Customer Services whose responsibilities include advising the Adoption and Fostering Panels and offering advice and consultation to social work staff, other professionals, adopters and foster carers

The Adoption Team makes use of other Council Departments, as required, to support planning and delivery of services.

1.5.3. The Adoption Service works in partnership with the South East Adoption Consortium members and regularly consults and canvasses their views to ensure that the service to adopters remains effective and responsive, with professional working relationships in place between staff and adopters.

1.5.4. The Department holds membership of the Adoption UK, British Association for Adoption and Fostering (BAAF), Inter-Country Adoption Centre, London Region Adoption & Fostering Officers Group, The South East Adoption Consortium

1.6 Purpose of the Adoption team

The Adoption Team is responsible for all the adoption recruitment, assessment and support work undertaken with adopted children and adults, adopters and birth family members affected by adoption within the Department. This involves domestic, inter-country and step-parent adoption; the provision of intermediary services including birth record counselling work; adoption support including the provision of an independent service to birth parents and birth family members affected by adoption.

1.7 Services provided

A summary of the services provided by the Adoption Service is as follows:

- Advice and general information on domestic, inter-country, step-parent adoption and non-agency adoption and adoption support which is provided through a duty system
- Monthly information meetings for people interested in domestic adoption; sessions are run in conjunction with our Consortium partners
- Initial home visits by an adoption social worker experienced in inter-country adoption work for those people wanting to adopt from abroad
- Comprehensive preparation and assessment for prospective adopters
- Undertaking the Court Reports and social work visits in step-parent, inter-country adoption and non-agency adoption applications

- Individual adoption support Social Workers following approval who work in partnership with the allocated Social Worker for the child(ren) to after making of adoption order and the ending of statutory adoption support where this is the responsibility of the Agency.
- Allocated Social Worker from the adoption team to family find for individual or sibling groups of children
- Planned general and specific recruitment activities for adopters, individual and specific groups of children.
- Advice, information and the provision of intermediary services (including birth record counselling, tracing and facilitating reunion) to adopted adults seeking information about their adoption and birth families and to birth family members affected by adoption seeking to make contact with a family member who has been adopted.
- The provision of intermediary services will be limited to adopted adults who live in the borough or who request access to their file and are willing to travel to the borough for access.
- The provision of intermediary services will be limited to birth family members affected by adoption through residence in the borough.
- The provision of an adoption service to birth parents and birth families affected by adoption including information, advice, support, assistance with maintaining indirect contact, counselling where it is planned that a child is placed for adoption and the provision of a regular support group to birth parents whose child has been placed for adoption or adopted.

Post placement and post adoption support through:

- management of the confidential letter box service;
- individual social work support to adoptive families;
- local CAMHS service; or where assessed as appropriate purchase of individual packages of therapeutic support;
- providing advice and information signposting service for adoption support services
- adoption support and training – series of training workshops; social events including an annual adoptive families picnic and a individual work with children placed for adoption or adopted and the development of groups for adopted children and young people;
- financial support in the form of single payments and on-going, regular payments (adoption allowances)
- Bromley Adoption Panel which fulfils statutory functions as required and offers advice and consultation to Social Work staff on adoption matters
- Services of Medical and Legal Advisers for advice, information and consultation in addition to - their specific roles and functions.

2 Procedures for Recruiting, Preparing, Assessing and Approving Prospective Adopters

2.1 Recruitment

2.1.1. From 1st July 2013, there is a change to the adoption process. There will be a new, shorter two stage approval process for prospective adopters. The aim of this process is to enable prospective adopters to learn about adoption within the first stage and then move through the approval process. The new approval process will be 6 months in total with Stage 1 taking 2 months and Stage 2 taking 4 months. There is also a new fast track process for some previous adopters and approved foster carers.

2.1. 2. Prospective applicants can make enquiries by phone or by an initial enquiry form from the web; or by emailing the Department, . The adoption Team, via dedicated duty time, aims to respond to all enquiries within two working days either by sending them an Information Pack or by contacting them on the phone and inviting them to an Information event.

2.1. 3. To meet the new tighter timescales in responding to adoption enquiries, our agency run monthly Adoption Information Events together with two of our South East Adoption Consortium partners (London Borough of Bexley and Medway Council). These meetings provide participants with an opportunity of hearing from social workers and adopters about the needs of the children being placed for adoption, what is involved in the adoption process and timescales.

Following the information meeting, if enquirers wish to continue the adoption process they will send their Registration of Interest form to their chosen adoption agency.

2.1. 4. Our website is under construction to reflect the changes to the adoption process and to attract new prospective adopters

2.2 Assessment Stage 1 – Initial Preparation/Training

2.2.1. Stage 1 begins when our agency accepts a prospective adopter's Registration of Interest; this stage should take no longer than 2 months. At Stage 1 we will enter onto an agreement with the prospective adopter (Stage 1 Plan) which sets out the responsibilities of us both.

2.2.2. Within Stage 1 The Adoption team will undertake police and health checks. The prospective adopter will need to give the agency the names of three referees, two of whom cannot be related to them. The agency will interview each referee and make a written report of the interviews with them.

2.2.3. Our adoption team will also explore with the prospective adopter the preparation most appropriate for them. We will inform the prospective adopter of their decision at the end of Stage 1 and explain that they must tell us if they wish to proceed to Stage 2 within six months of the decision. A prospective adopter is also able to take a break of up to six months between Stage 1 and 2.

2.3 Assessment Stage 2

2.3.1 Stage 2 of the adoption process will not begin until the a prospective adopter has completed Stage 1 and have notified the adoption team of their wish to proceed to Stage 2.

2.3.2. Stage 2 should take four months and is about intensive training and assessment. The adoption team and the prospective adopter will set up and an assessment plan; this would detail for example assessment process, dates of meetings/visits and agreed training.

2.3.3. Our agency will guide and support the prospective adopters through this process. They will be allocated a social worker to undertake home visits and find out more about their family background, lifestyle, health needs, support network and their strengths and vulnerabilities as a prospective adopter.

2.3.4. A comprehensive adoption assessment is undertaken using BAAF Prospective Adopter Report (PAR). All members of the household are seen individually as well as in a family group. Personal and family references are sought; ex-partners are contacted in relation to an applicant's capacity to parent, DBS, employer, medical, education and local authority checks are also undertaken.

2.3.5. The PAR- Prospective Adopter Report is shared with the applicant(s) so that they can make factual corrections and observations on the report prior to it being submitted to Panel.

2.3.6. The assessing social worker receives regular supervision throughout the assessment

2.3.9. If at any time during Stage Two, there are concerns about the competence of participants, then a brief report will be presented to Panel. If the Panel and the Agency Decision Manager confirm that the candidates are unsuitable, the candidates have the right to make representations to the Panel or to use the Independent Review Mechanism if they feel they have been treated unfairly.

2.4 Approval

2.4.1. The assessing social worker prepares the applicant(s) for attending the Bromley Adoption Panel. A leaflet and evaluation form are being designed to assist in this preparation

2.4.2. The Assessment Report, together with any written observations or representations, is submitted by the assessing social worker to the Panel.

2.4.3. The Panel's recommendations are then passed to the Agency Decision Maker to make the agency decision. The performance standard here is to make the decision within seven working days of the panel.

2.4.4. The decision is sent to the adopters within seven working days of it being made.

2.4.5. If the Agency Decision Maker is not minded to provide Agency approval, the applicants are notified in writing, including that they have 28 days to make representations to the Panel or use the Independent Review Mechanism.

3. Matching and Support

3.1. The Adoption Social Worker will continue to work with the adopters post-approval with a view to identify a link with a child.

After a period of 3 months, providing no match has been made, an

application to the Adoption Register is completed. This can occur before the 3 months if it is appropriate.

3.2. At the point of matching Adoption Support assessments are undertaken by Social Workers in connection with preparing plans for adoption for a child; approving adopters; and matching and placing children for adoption. These plans, including contact arrangements, for the child, adopters and their and birth parents and birth family members will be recorded in the Adoption Support Plan and the adoption Placement Plan and are the responsibility of the named worker to action.

3.3. The match is presented to the Adoption Panel for a recommendation and then a decision is made by the Agency Decision Maker within seven working days.

3.4. Following approval of match all adopters will have an allocated Adoption Social Worker from the Adoption Team who will visit regularly through the entire process from matching to the Adoption Order being made.

When a child is placed for adoption that child will have an allocated Looked after Children Social Worker who will offer support to the child and to the adopter(s) in caring for the child.

Adopters will also have access to the Emergency Out of Hours social work team.

3.5. All adopted adults and birth family members affected by adoption will receive the Information Leaflet for People Affected by Adoption. Birth families affected by adoption will also receive 'About Adoption : Information for Birth Families'.

Where a formal request is made for an adoption support assessment an adoption support referral will be completed and the referral acknowledged. The referral will be passed to the Adoption Support Services Adviser (ASSA) for consideration of priority for allocation and whether a full adoption support assessment, following the 'Assessment Framework', is required.

3.6. Where the request for assessment relates to a particular adoption support service or if it appears that the service user's needs can be adequately assessed by reference to one particular adoption support service a full adoption support assessment will not be undertaken. In these cases eligibility for the particular service will be assessed in relation to the service user's needs and circumstances.

3.7. Requests for financial assessment for an on-going allowance or significant lump sum payments will be subject to a financial assessment of means conducted by the Department.

3.8. Where adoption support services are being provided they will be reviewed on an annual basis.

3.9. Bromley has a **Head Teacher of a virtual school for Looked After Children** who is responsible for supporting schools in the education of Looked After Children, promoting their opportunities, monitoring their performance, preventing exclusion and enabling a smooth transition between schools, to enable them to achieve the best possible outcomes, and to ensure that the needs of Looked After Children are a priority in every school.

3.10. Should an adoption placement disrupt between the placement of the child and the making of the adoption order a 'Disruption Meeting' will always be held in order to gain a full understanding of the issues involved and assist in future planning for the child and the adopters.

4 Complaints Procedure

4.1. Complaints Officer: CSC Complaints, 3rd Floor, Stockwell Building, Bromley, BR1 3UH Tel: 020 8461 7644

Email: cypsocailcarecomplaints@bromley.gov.uk

4.2. All enquirers and adopters are given a copy of the Department's Complaints and Compliments leaflet should they feel they have been treated unfairly and wish to make a complaint. However, we endeavour to reach a reconciliation with complainants before it becomes necessary to make a complaint.

4.3. Applicants being assessed under Stage Two and who are subsequently not considered suitable as adopters may make representations to Panel or access the Independent Review Mechanism

4.4. If complainants feel we have not addressed their complaint, they are informed of their right to complain further to Ofsted, Piccadilly Gate, Store Street, Manchester, M1 2WD. Tel: 0300 123 1231.

5. Miscellaneous

5.1. The Children's Guide has been updated by the Living in Care Council.

5.2. An Information Leaflet for adopters attending the Adoption Panel is being designed with a view to help prepare them for attendance. As well as an evaluation form for their comments on their experience of attending Panel.

APPENDIX 1 – STAFFING AND STRUCTURE

Responsibility for the management of the adoption service is held by the
Group Manager of the Adoption and Fostering Service

Susan Noonan,

St Blaise Building,

Civic Centre,

Bromley, BR1 3UH

Telephone: 020 8313 3083

Fax: 020 8313 4400

Email: Susan.Noonan@bromley.gov.uk

Relevant Qualifications: Dip SW, CQSE, PQ1, CMS, DMS

Permanent Staff employed in the Adoption Service

Sue Noonan, Group Manager (1fte), Dip SW, CQSE, PQ1, CMS, DMS

Ana Parr, Deputy Group Manager Recruitment and Assessment (1fte), Dip SW, MS,
PQ Child Care Award

Deputy Group Manager Adoption Support (0.6fte), Vacant

Barry Miller, CQSW, Certificate in Counselling, PQ1, D32/D33 NVQ Assessor
Award, (Senior Practitioner)

Jenny Parkinson, MSc, CQSW, PQ1, PQ Child Care Award (Senior Practitioner)

Joy Bullen, CSS, PQ1 (Senior Practitioner)

Caroline Smith, MSc, CQSW, Practice Teacher Award, PQ1
(Senior Practitioner)

Anne Johnson, BA, CQSW, PQ1 (Senior Practitioner)

Alison Lewis, CQSW, Dip Social Studies, PQ1 (Senior Practitioner)

Elaine Brady, BA, DipSW, PQ1, PQ Child Care Award, Theraplay Award, PG Child
Focussed Systemic Child Psychotherapy (Senior Practitioner)

Hayley Peet, (Senior Practitioner)

Elizabeth Joseph (Business Support Assistant)

Nicole Molloy (Letter Box Coordinator)

Jody Malley, Business Analyst

All social workers are registered with the Health and Care Professions Council (HCPC)

Organisation of Structure of the Adoption Service

Bromley Education and Care Services is part of Bromley Council and is managed by the Executive Director of Education and Care Services, Terry Parkin.

The Children's Social Care Division, as part of ECS, is responsible for the delivery of the Fostering Service.

Within the Children's Social Care Division, there are specialist teams dealing with Referral and Assessment (area teams), Safeguarding and Care Planning (area teams), Quality Assurance, Looked After Children, Leaving Care, Adoption, Fostering, Commissioning, Youth Offending and Teenage and Parent Support.

Social Workers for children requiring an adoption placement for a child are located in the area teams. The Adoption Team is part of the Adoption and Fostering Service and sits within the Care and Resources Service, thereby maintaining close links with the Safeguarding Team, The Fostering team the Looked After Children's team, as well as the Commissioning team.

The Bromley Adoption Service is responsible for establishing, maintaining and servicing the Bromley Adoption Panel. The Panel, in carrying out its regulatory functions, makes recommendations to the Agency Decision Maker, (Kay Weiss — Assistant Director for Safeguarding and Social Care Division).

The work and performance of the Adoption Panel is included in the report on Adoption Activity submitted to the Care Services Portfolio Holder and the Corporate Parenting Executive.

Adoption of the Statement of Purpose

The Statement of Purpose of the Adoption Service is contained and expanded within the Adoption Policies and Procedures.

The Policies and Procedures and the Statement of Purpose contained have been placed before Council members and fully endorsed and supported.

The Statement of Purpose will accompany the Annual Report of the Adoption Service and will be presented to the Portfolio Holder for Care Services.

APPENDIX 2 – QUALITY ASSURANCE

The Group Manager is currently responsible for ensuring the supervision of all permanent staff in the Adoption and Fostering Team. Social workers are supervised by the deputy group manager on a three-weekly basis and all other staff are seen four-weekly. Supervision and line management practice follows the Divisional Supervision Policy and Management Standards.

Copies of the signed supervision notes are placed on the relevant paper or electronic file with any agreed action noted.

A quality assurance file audit will be undertaken on a regular basis as has been recently introduced in other teams. A new audit form is being produced for this purpose.

The Deputy Group Manager [Adoption] is delegated to be the Professional Adviser to the Adoption Panel and in this capacity reads all PAR, the child permanency records and matching reports on adopters and children and provides an important quality assurance role prior to presentation of reports at Panel.

The Adoption Panel provides a quality assurance function which is exercised through individual recommendations on cases presented and recorded in the Panel Minutes and Panel Decision Sheet, together with advice from medical, legal and other advisors to Panel.

The Group Manager is supervised on a regular, three-weekly basis by the Head of Service, Care and Resources.

An annual report on adoption activity is produced and submitted to both the Care Services Portfolio Holder and the Adoption Panel annually.

In line with requirements, the Adoption Service will be inspected by Inspectors appointed by Ofsted under the Care Standards Act 2000.

Report No.
CS 14047

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services Portfolio Holder

For Pre Decision Scrutiny by Care Services PDS Committee on:

Date: 26th June 2014

Decision Type: Non-Urgent Executive Non-Key

Title: MARKET POSITION STATEMENT

Contact Officer: Richard Hills, Senior Commissioner

Tel: 020 8313 4198 E-mail: richard.hills@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: N/A

1. Reason for report

- 1.1 To notify Members of the work under way in Bromley as part of the national programme: *Developing care markets for quality and choice (DCMQC)*. The programme was launched by the Department of Health last year and every Local Authority has a duty to produce a Market Position Statement. Officers would now like to consult on an initial draft with providers and service users.
-

2. RECOMMENDATIONS

- 2.1 Care Services PDS are asked to comment on and approve the work so far on the draft Market position Statement and to recommend that officers can enter into consultation with providers and service users.
- 2.2 The Portfolio Holder is asked to agree that a consultation on Bromley's draft Market Position Statement be undertaken with all relevant stakeholders.
- 2.3 The findings of the consultation, and the resulting final version of the document, to be reported back to Members later in the year.

Corporate Policy

1. Policy Status: Producing a Market Position Statement is a new duty for Local Authorities
 2. BBB Priority: Excellent Council: Supporting Independence
-

Financial

1. Cost of proposal: No direct cost but it is an opportunity to start a dialogue with providers generally about the likely level of funding available in the future for directly commissioned services
 2. Ongoing costs:
 3. Budget head/performance centre: Executive Director, Education, Care and Health for London Borough of Bromley
 4. Total current budget for this head: £34,458k controllable budget Adult Social Care
 5. Source of funding: ECHS revenue budget for London Borough of Bromley
-

Staff

1. Number of staff (current and additional): No additional staff
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Non statutory requirement : Government Guidance.

Set out in the White paper 'Caring for our future' that *"the government will introduce a duty upon local authorities to promote diversity and quality in the provision of services"*

This intent has been followed up in the new Care Act 2014 under general responsibilities part 5: *A local authority must promote the efficient and effective operation of a market in services for meeting care and support needs*

2. Call-in: Applicable:
-

Customer Impact

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

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Background

- 3.1.1 A Department of Health launched a programme called: *Developing care markets for quality and choice (DCMQC)*. The ambitions for this programme were set out in the White paper 'Caring for our future' which made two firm announcements:
- 3.1.2 *To strengthen diversity (in the market), the government will introduce a duty upon local authorities to promote diversity and quality in the provision of services*
- 3.1.3 *To help Local Authorities carry out this duty, we are offering support to every local authority to create a market position statement*
- 3.1.4 This follows on from the general policy direction that Local Authorities have a changing role in overseeing and securing quality care service for all local residents. Over time the Department of Health expect to see a “*shift from [Local Authorities] occupying a role of major procurer to one of facilitator of the whole social care market*”.
- 3.1.5 Increasing demand, greater numbers of self-funders and personal budget holders, and restrictions in state funding will mean significant change to the care market. In order to achieve greater choice and control as to how, where and what care is delivered requires a local diverse care market. Local Authorities have a clear role in stimulating, managing and shaping this market to address pressing care needs.

3.2 Market Facilitation

- 3.2.1 To achieve this 'shift' Local Authorities need to develop the role of market facilitator. By way of an explanation this role breaks down into three levels of activity:
- 3.2.2 **Market Intelligence.** Is the first level of market facilitation and provides the necessary bedrock for all further interaction with the local market. The Local Authority needs to be well informed about its local provider market. It needs to understand what's working well, where there is potentially over provision and where gaps in provision exist that need to be addressed. It needs to build the evidence base to better understand the pressure points regarding quality supply including detail on local provider performance, amount of provision readily available, benchmarking on costs and quality of that provision. All the Local Authority commissioning strategies need to tap into this level of evidence around supply as well as demand. Most Local Authority are already on top of this, however they struggle to have details around the whole market including where self-funders are going to meet their particular care requirements.
- 3.2.3 **Market Restructuring** The next level is to use market intelligence to influence changes and improvements to the local market. This includes developing and publishing a Market Position Statement. The statement is there to translate all the data and intelligence collected into a format that is useful and helpful to providers. The document should clearly set out the current and future commissioning intentions and priorities and highlights services that, based on the evidence, would be particularly beneficial to its local community. The document should open up dialogue with local providers and encourage a more open and transparent exchange of information that assists in improving the service offer to residents. The document can be refreshed each year and should provide a 'here and now' snap shot of the market which providers can use when targeting their services and preparing business proposals. Most Local Authorities are only in the early stages of being able to do this effectively and the *Developing care markets for quality and choice (DCMQC)* was put in place by the Department of Health to

continue to develop this role.

3.2.4 Market Interventions The final stage in this evolution of the role of the Local Authority in the provision of care is to make targeted and positive interventions in the market through its commissioning strategies. Having worked closely with local providers and having a clear understanding and overview of local need the Local Authority can choose to make a specific intervention where it believes it can improve outcomes for residents. These types of intervention can include:

- Stimulating specific parts of the market with targeted financial incentives
- Using new and innovative funding models to stimulate growth such as match funding, risk share, loans and income share
- Offer specific training to support the local workforce in filling a skills gap
- Support a provider in putting together a business proposal that addresses a specific gap in the local offer
- Championing a service through advertising and promoting the service to residents
- Even setting up not for profit ventures.

3.2.5 Local Authorities have been inadvertently doing some of these things for years but taking on a strategic lead for market intervention presents a step change from previous commissioning.

3.3 Care Act

3.3.1 This role, as explained above, has been further reinforced in the Care Act under general responsibilities part 5 which states :

(1) A local authority must promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market—

(a) has a variety of providers to choose from who (taken together) provide a variety of services;

(b) has a variety of high quality services to choose from;

(c) has sufficient information to make an informed decision about how to meet the needs in question.

(2) In performing that duty, a local authority must have regard to the following matters in particular—

(a) the need to ensure that the authority has, and makes available, information about the providers of services for meeting care and support needs and the types of services they provide;

(b) the need to ensure that it is aware of current and likely future demand for such services and to consider how providers might meet that demand;

(c) the importance of enabling adults with needs for care and support, and carers with needs for support, who wish to do so to participate in work, education or training;

(d) the importance of ensuring the sustainability of the market (in circumstances where it is operating effectively as well as in circumstances where it is not);

(e) the importance of fostering continuous improvement in the quality of such services and the efficiency and effectiveness with which such services are provided and of encouraging innovation in their provision;

(f) the importance of fostering a workforce whose members are able to ensure the delivery of high quality services (because, for example, they have relevant skills and appropriate working conditions).

3.4 Bromley's Draft Market Position Statement

Officers have produced a draft MPS which we are now looking to consult on with providers before taking the final version through members for approval and authorisation to publish.

3.4.1 The Market Position Statement will be the theme of the next Adult Social Care Forum. The council will be running facilitated sessions for attendees focusing on what services the community sector and other local providers should be making available to residents to maximise independence for longer and prevents the need for more complex, long term care packages.

3.4.2 The draft document is being made available to Members as a link.

3.5 How does this document fit with the Local Children's Offer?

3.5.1 It is slightly different but all part of the same commissioning process. The Local Children's offer was a requirement of the Children and Families Act 2014 which required the Local Authority to tell everyone involved in the care and support of disabled children and young people, those with Special Educational Needs, and their families about what help is available in the Borough. In this way it was a communication with service users informing them of the local services available to them, whether offered directly by the Borough or other local providers such as Bromley Health Care.

3.5.2 The Market Position Statement was also driven by national requirements, however it is different, in as much as it is directed at the provider market and is intended to open a dialogue between commissioners and providers about the future shaping of the local market offer.

3.5.3 The Director is considering the option for the circle to be completed by asking Children's to produce a similar Market Position Statement for their providers and asking adult care services to produce a local offer for their service users. The consultation on this first Market Position Statement for Adults will inform further work.

4. POLICY IMPLICATIONS

The Market Position Statement is there to make our existing policies (which are reflected in our commissioning) clearer and more transparent for providers. Providers need to be able to use the document to better understand the Council's position and to adjust and develop their business models accordingly to best service the local population's care needs.

5. FINANCIAL IMPLICATIONS

As a summary of the commissioning intentions for adult social care in the borough this document works within existing financial budgetary requirements.

6. LEGAL IMPLICATIONS

The Council's legal obligations have been set out in 3.1 and 3.3 which sets out our duties under the Care Act.

7. PERSONNEL IMPLICATIONS

None

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

Report No.
CS14063

London Borough of Bromley

PART 1 – PUBLIC

Decision Maker: Executive

**For Pre-Decision Scrutiny by Care Services PDS Committee
on 26th June 2014**

Date: 16th July 2014

Decision Type: Non-Urgent Executive Key

Title: **PROPOSAL TO EXTEND THE CONTRACTS FOR DELIVERY OF
SUBSTANCE MISUSE SERVICES**

Contact Officer: Claire Lynn, Strategic Commissioner, Mental Health and Substance Misuse.
Tel: 0208 313 4034 E-mail: claire.lynn@bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director, Education, Care and Health Services

Ward: Borough Wide

1. Reason for report

- 1.1 This report is seeking approval of the Executive to extend the three contracts with Crime Reduction Initiatives (CRI) to provide an integrated drug and alcohol service for a period of one year from January 2015 until December 2015 as allowed for in the contracts.
- 1.2 This report is also seeking approval of the Executive to extend the contract with KCA to provide an integrated drug and alcohol service for children and young people for a period of one year from January 2015 until December 2015 as allowed for in the Contract.

2. **RECOMMENDATION(S)**

- 2.1 **Care Services PDS are asked to note and comment on the details of this report.**
- 2.2 **The Executive is asked to agree to the extension of the three existing contracts, Stabilisation and Assessment Service, Recovery Service and the Intensive Prescribing Service with CRI, and the Contract with KCA for the children and young people's substance misuse service (BYPASS), in line with the Council's Contract Procedure Rules (CPR) for a period of one year from January 2015 until December 2015.**

Corporate Policy

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

Financial

1. Cost of proposal: Estimated Cost: £1,408, 971 (2014/15)
 2. Ongoing costs: Recurring Cost: N/A
 3. Budget head/performance centre: Public Health
 4. Total current budget for this head: £2,266k
 5. Source of funding: Public Health Grant
-

Staff

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

Legal

1. Legal Requirement: Non-Statutory - Government Guidance:
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 1000 plus
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: None

3. COMMENTARY

- 3.1 In 2010 an integrated drug and alcohol provision for people over 18 years, providing a single point of access to all services, a range of therapeutic and support services and a full user led aftercare service was designed in partnership between Bromley Primary Care Trust and the Council.
- 3.2 In 2011 a new integrated drug and alcohol service was tendered by Bromley Primary Care Trust. The contracts cover three distinct service pathways namely:
- (1) **Stabilisation and Assessment:** providing a single point of contact, assessment and care co-ordination for people requiring specialist drug and alcohol services.
 - (2) **Recovery Service:** delivery of intervention programmes, including a return to employment, to support people to maintain the abstinence or stability from substances.
 - (3) **Prescribing Service:** to offer prescribing service for people who require stabilisation of their chaotic drug use to reduce dependence on the illegal drug enabling engagement in a process towards abstinence and recovery.
- 3.3 CRI was awarded all three contracts delivering integrated substance misuse services through the assessment, treatment and recovery process in Bromley. The contracts were awarded in January 2012 for three years plus the option of extending for one year.
- 3.4 During the life of the contracts CRI has developed work with service users and to improve the service performance as part of this contract. There have been improvements to enable individuals to access the service. These include extension of opening times to include some evenings and weekends and a liaison nurse linked to the hospital and to A&E to ensure individuals are aware of services.
- 3.5 CRI have been performing well across the three contracts although have not met their performance enhanced 1% of the contract value on the Stabilisation and Assessment Service as there has been a small reduction in the number of people misusing drugs receiving treatment. In 2011/12 there were 555 people in treatment; in 2012/13 there were 520. This reflects the national downward trend. There has however been an overall increase in the number of individuals successfully completing treatment. As an overall percentage of the individuals in treatment this equates to 9.5% for opiate users and 35.8% for non-opiate users which is in line with rates for the rest of England. Individuals achieving this outcome demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health. Evidence suggests that clients who stop using opiates in the first six months of treatment are 4.3 times more likely to complete successfully than those that continue to use. CRI continues to ensure that individuals move through the treatment system in a timely manner and whilst there are 20.6% of opiate users who have been in treatment for over six years, this figure is below the national average.
- 3.6 For young people under 18 there is a separate service "BYPASS" which was tendered and procured by the Bromley Primary Care Trust and the Council at the same time as the adult service. The contract was awarded in January 2012 for three years plus one year to KCA. They work directly with children and young people who abuse substances, their parents, schools and other services. It provides an integrated drug and alcohol service with one point of access, important links with the Local Authority Children Services, mental health services and schools. It also ensures that the education training and information remit is undertaken in a proactive way to engage with children and young people.

- 3.7 KCA perform well on this contract working with 120 young people in total during 2013/14. The highest number of referrals came from colleges. The primary substances that young people presented with were cannabis and alcohol misuse. There were 714 one to one sessions offered, of which 472 were attended and 17 parenting sessions were completed with over 130 parents being seen during these. There have been improvements to enable individuals to access the service, These include work with schools and to A&E to ensure individuals are aware of services. BYPASS had a successful discharge of 85% during the year that is individuals who left the service having achieved abstinence or reduction in the use of the substance.
- 3.8 Substance Misuse funding and contracts were identified as being part of the Public Health portfolio which were transferred in April 2013 to the Local Authority. In the report "Public Health Transfer of Contracts" to the Executive on 28th November 2012 details of the process of stock take, stabilise and shift that needed to be undertaken by the Primary Care Trust (PCT) in order to properly prepare their Public Health Contracts ready to come across to the Local Authority under the Transfer Scheme were outlined and agreed. All the substance misuse contracts which were held by the Bromley Primary Care Trust were novated to the Council as part of this transfer including the contract with KCA.

4. FINANCIAL IMPLICATIONS

- 4.1 The contract values are shown in the table below the change in the contract values for 2014/15 is following Members agreement for a £50,000 waiver on each of the three CRI contracts as part of the ceasing of the Rapid Prescribing contract :

Contract	Contract Value	Contract Value	Contract Value	Contract Value	Contract Value	
	2011/12	2012/13	2013/14	2014/15	2015/16	
	(Jan 12 - Mar 12)				(Apr 15 - Dec 15)	
Adult Stabilisation & Assessment	134,763	539,050	539,050	589,045	490,871	2,292,778
Adult Recovery Service	74,035	296,140	296,140	346,143	288,453	1,300,911
Intensive Drug Prescribing	75,060	300,240	300,240	345,803	288,169	1,309,512
BYPASS	31,995	127,980	127,980	127,980	106,650	522,585
	315,853	1,263,410	1,263,410	1,408,971	1,174,143	5,425,786

5. LEGAL IMPLICATIONS

- 5.1 The Contacts were let with an **option to renew for an additional year and the Council's Contract Procedure Rules (CPR) allow for an extension to be granted** where there has been satisfactory performance.

Non-Applicable Sections:	Personnel implications, Policy Implications
Background Documents: (Access via Contact Officer)	<p>28 November 2012: http://cds.bromley.gov.uk/documents/s50014515/CS13047%20Public%20Health%20</p> <p>13 June 2013: : http://cdslbb/documents/y6664/Public%20Health%20-%20Administration%20of%20ContractsPART%202%20EXEMPT%20REPORT%20TEMPLATE.pdf?T=-2&&\$LO\$=1</p> <p>11 March 2014: http://cds.bromley.gov.uk/documents/g4488/Printed%20minutes%20Tuesday%202011-Mar-2014%2019.00%20Care%20Services%20Policy%20Development%20and%20Scrutiny%20Committee.pdf?T=1</p>

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Report No.
CS 14048

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive
For Pre-Decision Scrutiny by Care Services PDS Committee on
26th June 2014

Date: 10th July 2014

Decision Type: Non-Urgent Executive Key

Title: ONE SECTION 75 AGREEMENT WITH BROMLEY CCG

Contact Officer: Terry Parkin, Director Education, Care and Health Services
Tel: 020 8313 4060 E-mail: terry.parkin@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: N/A

1. Reason for report

- 1.1 This report sets out the legal framework for how integrated commissioning and joint services between The London Borough of Bromley and Bromley's Clinical Commissioning Group will be administered.
 - 1.2 The report proposes that all our existing and future (e.g. *Better Care Fund*) joint commissioning and joint service delivery be captured under one overarching arrangement. The report proposes to use a single *Section 75* agreement as set out in the National Health Service Act 2006. The agreement will set out the principles around governance and financial management under which all these arrangements can take place and will also contain a list of schedules which capture at a high level all the existing agreements in one place.
 - 1.3 The purpose of the report is to seek Executive approval to this proposed approach in preparation for further integration over the coming year.
-

2. RECOMMENDATIONS

- 2.1 Care Services PDS are asked to note and comment on the proposals set out in the report.
- 2.2 The Executive is asked to:

- (i) approve the proposed approach to legally administering our integrated commissioning and service delivery arrangements under one high level Section 75 agreement between The London Borough of Bromley and Bromley's Clinical Commissioning Group; and**
- (ii) delegate to the Chief Executive the power to approve the final Section 75 agreement between LB Bromley and Bromley CCG. The agreement will be re- signed and re-sealed on an annual basis.**

(N.B. New individual agreements proposed by the Joint Integrated Commissioning Executive will be covered under a deed of variation and will be subject to the standard financial and contract regulations based on the level of funding involved. For example if a new agreement involves funding contributions of over £1m it will be taken through Executive for a decision first.)

Corporate Policy

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

Financial

1. Cost of proposal: This agreements currently captures all existing funding arrangements previously (minus placements) approved for health and care services:
 - A) Over £13m in one off funding sitting with the local authority for integrated services and to maintain eligibility criteria
 - B) A smaller amount of ongoing revenue commitments made between the two organisations totalling £3.5m p.a.
 2. Ongoing costs: There is a commitment by both partners to deliver certain activities and services in an integrated way. However the level of ongoing financial commitment is subject to annual review
 3. Budget head/performance centre: Executive Director, Education, Care and Health for London Borough of Bromley
 4. Total current budget for this head:£34m care services controllable budget
 5. Source of funding: ECHS revenue budget
-

Staff

1. Number of staff (current and additional): No additional staff
 2. If from existing staff resources, number of staff hours: The proposal is to streamline multiple existing Section 75, 76 and 256 agreements into one overarching agreement which is flexible enough to deliver against the fast changing integration agenda. Also to reduce the staff hours currently spend on this administrative work which is becoming considerable.
-

Legal

1. Legal Requirement: Non statutory requirement : Government Guidance. Under current legislation (National Health Service and Community Care Act 1990 Section 47) the Council's statutory assessment function can only be carried out by a local authority or by an NHS organisation on behalf of the local authority through an agreement under Section 75 of the National Health Service (NHS) Act 2006.
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): There will be no impact on service users from the proposals contained in the report as these cover existing agreements already in place. Future integrated commissioning and services will have a direct impact on service users as delivery is joined up to target better outcomes for service users.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1 Background

3.1.1 Over the past ten years there have been a number of partnership agreements made between social care and health to facilitate the joint commissioning and delivery of services. These have all been legally underpinned by Section Agreements, the latest versions of which are covered under the National Health Service Act 2006.

Explanation of Section Agreements in use

3.1.2 **Section 75** - allows the pooling of funds where payments may be made towards expenditure incurred in the exercise of any NHS or 'health-related' local authority functions. Section 75 also allows for one partner to take the lead in commissioning services on behalf of the other (lead commissioning) and for partners to combine resources, staff and management structures to help integrate service provision, commonly known as 'Health Act flexibilities'. Here staff can be seconded/transferred and managed by another organisation's personnel. (Section 113 of the Local Government Act allows staff to be available to 'non-employing' partner organisations). The Act also makes provision for the functions (statutory powers or duties) to be delivered on a daily basis by another partner, subject to the agreed terms of delegation. This legislation only applies to local authority and health partners.

3.1.3 **Section 76/256** – there are also additional 'lighter touch' legislative provisions in the NHS Act 2006 to enable joint health and social care funding can be quickly aligned when there is a good reason to do so. Section 76 allows local authorities to make payments (service, revenue or capital contributions) to NHS bodies to support specific additional NHS services, where this ensures a more efficient use of resources. Section 256 allows CCGs to make the same such payments to local authorities to support or enhance specific council services.

Local Use of these agreements

3.1.4 In 2013/14 locally there were 11 such agreements in place which covered a number of services and activities which can be summarised as:

- Joint funded posts
- Contributions to joint contracts with community groups
- Access to call off from a partners contract
- Grants normally from DoH passed through Health to LB Bromley
- One-off sums for specific Programmes (e.g. CCG's Promise Programme)
- Rent for use of a building

3.1.5 The advent of the Better Care Fund and the plans to further integrate Care and Health represents a step change in the scale and depth of local integration. The way that both organisations jointly administer these agreements needs to reflect that. Some of these existing arrangements have been in place for many years and grew organically over time. Over the past year processes have been formalised and existing agreements reviewed, rewritten and any outstanding issues resolved.

3.1.6 Part of this process of review is setting out a way to streamline the administrative burden as both organisations have limited resources to allocate to drawing up individual partnership agreements for each and every piece of integration work however small (e.g. a shared post). Because there is a requirement from both sides to make efficiencies and to reduce any existing bureaucratic processes wherever possible senior officers, through the *Joint Integrated*

Commissioning Executive, have reviewed the existing processes and concluded that it would be better to:

- Have one overarching Section 75 which sets out the core principles under which all these individual agreements can take place.
- That this key document should have attached a set of schedules, which detail all active partnership agreements so as they are captured in one document to make it easier for finance and legal administrators and to keep a clear and transparent audit trail of this fast changing agenda.
- Where further details are required such as full contract specifications with a provider, or detailed project and programme deliver plans or full commissioning strategies these can be referenced in the schedules but held elsewhere to prevent the document from becoming unmanageable.

3.1.7 This approach has been checked with finance, legal and audit to ensure that it complies with our own corporate standards as well as being a practical solution to capturing the ever increasing amount of integration taking place across our services.

3.2 Existing agreements that will be included in a Section 75 for 2014/15

3.2.1 The below summaries the existing services which will be captured in the Section 75 for 2014/15. All these agreements have already been through the appropriate authorisation processes depending on the level of funding involved.

3.2.2 LB Bromley currently pay a contribution towards two large contracts held by the CCG for:

- Short term breaks service for Children
- Intermediate Care

3.2.3 Bromley CCG pay a contribution to:

- Two commissioning posts
- Several community contracts, including day opportunities and mental health services
- Using the Council's Community Equipment contract
- Rental of space at Yeoman House

3.2.4 In addition the CCG's one-off Promise programme funding that sits with LB Bromley is also included

- Promise Programme

3.2.5 The Better Care fund, which comes into full effect in 2015/16, is likely to greatly increase what is included and captured in this Section 75. In 2014/15 the final version for sign off will also include the funding (£992k) that NHS England have made available for the 'planning year' in order for Local Authorities and CCGs to get ready for the Better Care Fund.

3.2.6 Governance, financial management and risk arrangements will be clearly defined and set out in this agreement, particularly the extent of delegation agreed. With most of these agreements one partner acts as the host to undertake the other's functions, including management of staff on behalf of both parties (also described as integrated management). But as the scale of integration increases services could be delivered under pooled budgets and jointly funded posts where the role of host partner will be harder to define in services that deliver on both health and care outcomes. In these circumstances it will be increasingly important to have

strong leadership and good working relations underpinned by a robust set of agreements. As such the agreement should include clear guidance on decision making, resolution of disputes, two way process on information flow, compliance with financial regulations and contract procedures and audit requirements.

3.2.7 A draft Section 75 has already been drawn up and is being finalised at officer level between both organisations ready for final approval.

4. POLICY IMPLICATIONS

The proposals in the report contribute to the Council's Building a Better Bromley priority of supporting independence by enabling further integration of health and social care to benefit social care clients. It also contributes to Excellent Council by demonstrating partnership working to provide seamless services to vulnerable clients and to streamline administrative processes wherever practical to do so.

5. FINANCIAL IMPLICATIONS

- 5.1 Both LB Bromley and Bromley CCG will remain responsible for obtaining the appropriate approvals through their individual governance structures to agree their respective contributions within their wider corporate budget cycles.
- 5.2 Financial Contributions shall be adjusted each year dependent on what services and commissioning activity has been agreed to be delivered through the Section75 agreement. An annual review process will be overseen by respective Directors through the Joint Integrated Commissioning Executive (JICE) to look at the performance of the services and to set joint efficiency targets.
- 5.3 Current funding is split into two types. Firstly one off funding including the funds passed across by the BCCG for integrated care projects including Promise as well as the DoH Social Care Grant and the BCF planning year funding, the combined value of which stands at £13m. Then secondly there is a smaller amount of ongoing revenue commitments as explained in 3.1.4 made between the two organisations totalling £3.5m per annum. Some of these LBB pay BCCG for services e.g. *intermediate care* and *children's short breaks* service which are provide through their community health provider. Other services BCCG pay LBB such as for the use of our call off contract with Mediquip for the provision of community equipment.
- 5.4 In future years both organisations shall agree their contributions for the following Financial Year before 31st March working within their existing departmental budgets. This figure will be subject to due diligence before the agreement is finalised. The agreement would also set out how any underspends would be apportioned between the parties.
- 5.5 New arrangements added to the Section 75 as a deed of variation will be subject to exactly the same financial and contractual procedure rules before being added.

6. LEGAL IMPLICATIONS

- 6.1 The agreement establishes a legal framework for administering integrated services between local social care and health commissioners in the Borough.
- 6.2 The Section 75 Agreement is designed to further the consolidation and co-ordination of provision of Care and Health services. Under these arrangements the legal requirement for the Council to meet its statutory duties will remain with the Council. However, the proposed

Agreement allows for either LB Bromley or Bromley CCG to commission or directly deliver services on each other's behalf where it makes sense to do so.

7. PERSONNEL IMPLICATIONS

- 7.1 Any staffing implications arising from the proposed changes to the current Section 75 arrangements would be the subject of a staff and staff representatives' consultation process pursuant to the Council's Managing Change Procedure. Staff and their representatives and any other stakeholders would be consulted in a timely manner.

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	<p>ADULT SOCIAL CARE – IMPACT OF THE CARE BILL AND FUTURE NHS FUNDING – report to Executive by the Executive Director of Education, Care and Health Services 20th November</p> <p>BETTER CARE FUND (Formerly Integration Transformation Fund ITF) – report to Health and Wellbeing Board by the Executive Director of Education, Care and Health Services, 28th January</p>

Report No.
CS14067

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker: Executive

**For Pre-Decision Scrutiny by Care Services PDS Committee
on 26th June 2014**

Date: 16th July 2014

Decision Type: Non-Urgent Executive Key

Title: SECTION 106 FUNDING FOR HEALTH PROVISION

Contact Officer: Lorna Blackwood, AD Commissioning
Tel: 020 8313 3613 E-mail: lorna.blackwood@bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director of Education, Care & Health Services

Ward: List wards here

1. Reason for report

Officers and Health colleagues at Bromley Clinical Commissioning Group have reviewed how Section 106 funding, which the planning division secures specifically for health services, should be processed, to secure the best value and quality health provision for residents.

2. **RECOMMENDATION(S)**

2.1 Care Services PDS are asked to note and comment on the contents of this report.

2.2 That the Executive agrees the process for Health partners accessing and utilising specific health related funding made available through Section 106 agreements as set out in paragraph 3.8;

2.3 That authority is delegated to the Executive Director, Education Care and Health Services, in consultation with the Portfolio Holder and Director of Corporate Services, to approve individual health proposals up to £250k and can allocate the funding under a formal grant arrangement; and

2.4 That authority to agree proposals for spending above £250k be delegated to the Care Services Portfolio Holder up to £1m.

Corporate Policy

1. Policy Status: Existing policy. Process rather than policy change
 2. BBB Priority: Supporting Independence.
-

Financial

1. Cost of proposal: Estimated cost £702,057
 2. Ongoing costs: N/A.
 3. Budget head/performance centre: S106 Deposits
 4. Total current budget for this head: £702,057
 5. Source of funding: Section 106 funding
-

Staff

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

Legal

1. Legal Requirement: Statutory requirement. requirement to utilise Section 106 funding as stated in the planning agreement
 2. Call-in: Call-in is 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 The power of a Local Planning Authority to enter into a Planning Obligation with anyone having an interest in land in their area is contained in section 106 of the Town and Country Planning Act 1990 (as amended by Section 12 of the Planning and Compensation Act 1991).
- 3.2 There are 7 main service areas where monies are received through the use of S106 obligations: Local Economy, Community or Town Centre use, Highways/Traffic, Education, Health, Land, Affordable and Other (which records payments for any other contributions which do not fall into one of the above categories).
- 3.3 Increasingly over the last few years the Council has used the NHS London Healthy Urban Development Unit (HUDU model) formula, which gauges the impact that residential developments have on the capacity of health services and produces a health contribution per unit.
- 3.4 Historically the processes for allocating Section 106 health funding was clear. The Primary Care Trust (PCT) were responsible for maintaining an Estates Strategy and would manage any health allocation as a contribution to delivering against this strategy.
- 3.5 In April 2013 when the PCT was disbanded and Clinical Commissioning Groups (CCG) were established in their place, the responsibilities for estate management for health provision was effectively split. NHS London as a regional body was made accountable for primary care (GPs and Pharmacies) while the CCG retained responsibility for acute and community care (Hospital and health clinics). The post specifically set up to deal with estates management has been lost and as a result the allocation of Section 106 funding for health projects in the Borough has been problematic.
- 3.6 The Local Authority is holding funds from a number of Section 106 agreements that are now approaching the end of their term and need to be committed to health estate improvements.
- 3.7 Details of all the outstanding Section 106 Section funding totalling £702,057 from 13 Agreements for Health is set out in Appendix One.
- 3.8 Subject to agreement from the Executive it is proposed that:
- Planning continue to be responsible for flagging these agreements up as early as practically possible and putting them into an agreed format.
 - The Assistant Director Commissioning in ECHS will act as the Local Authority lead taking the information from planning and liaising with the Director of Finance at the CCG who is now the designated CCG officer responsible for Section 106 funding.
 - The CCG would be responsible for liaising with their partners at NHS London so as any proposals are agreed and authorised by both the CCG and NHS England covering all parts of the health economy in the Borough.
 - Proposals must be for infrastructure projects which require capital funding. Proposals must meet any criteria as set out within each individual Section 106 agreement.
 - The Executive Director EHS is given delegated authority, in consultation with the Portfolio Holder and Director of Corporate Services, to approve funding up to £250k per scheme against firm proposals from the CCG as to how the Section 106 funding will be committed.

- Agreement to proposals for spending above £250k would be delegated to the care Services Portfolio Holder up to £1m
- That the agreed funding is transferred to CCG as a grant with appropriate legally binding conditions attached, including conditions to ensure that the CCG informs the Council of general progress, expenditure and completion of schemes.
- That delivery of the agreed schemes against the spending plan will be monitored by the Assistant Director Commissioning in ECHS.
- Planning, in consultation with Health partners at the CCG and the Assistant Director Commissioning in ECHS would be responsible for considering health priorities in the preparation of the Borough's local plan.
- Ongoing spending commitments funded through grant will be reported to Members as part of the overall monitoring of Section 106 funding.

4. POLICY IMPLICATIONS

- 4.1 This is a process rather than policy change as a result of the changes to health commissioning resulting from the Health and Care Act 2012.

5. FINANCIAL IMPLICATIONS

- 5.1 The table below has the details of the thirteen S106 agreements where contributions have been received: -

Planning Ref	Development	Contribution (£)
172	The George, High Street Farnborough	12,228
178	Ravensbourne College, Chislehurst	163,000
180	James Dixon School, Anerley Park	26,496
197	Orpington Halls, Orpington	13,243
214	Anerley School for Boys, Penge	105,780
218	The Partidge, Chipperfield Road	13,244
223	Anerley School for Boys, Penge	75,768
227	Land at Rear of Nugent shopping park, Orpington	7,695
228	Land at former 1-23 Orchard Grove, Orpington	98,240
230	Enterprise House, 45 Homesdale Road	84,296
233	Garrard House, 2-6 Homesdale Road	35,000
237	Oatlands, 210 Anerley Road Penge	26,270
274	Denton Court, 60 Birch Row	40,797
Total		702,057

- 5.2 Further financial information is included in the Part 2 Appendix 2.

6. LEGAL IMPLICATIONS

- 6.1 Planning obligations (or Section 106 agreements) are private agreements negotiated, usually in the context of planning applications, between local planning authorities and persons with an interest in a piece of land. They are intended to make otherwise unacceptable development acceptable in planning terms. In addition the requirements of the obligation must be directly relevant development and be fairly and reasonably related to the scale of the development.
- 6.2 As is set out in the body of the report the Council has where it has been appropriate to do so sought financial contribution towards health provision in the Borough. In reaching a decision on spending section 106 money then regard must always be had to the terms of the agreement which can include e.g. geographical limitations on the area where money can be spent or direct funding to a particular facility.

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

Appendix One: Details of all the outstanding Section 106 Section funding totalling £702,057 from 13 Agreements for Health

Planning Ref	Development	S106 Agreement Clause	Amount & what the money should be spent on
172	The George, High Street Farnborough	To pay the Health Contribution to the Council upon Implementation of the Planning Permission. The sum of £12,228 to provide additional primary care infrastructure within the London Borough of Bromley	£12,228 to provide additional primary care infrastructure within the London Borough of Bromley
178	Ravensbourne College, Walden Road, Chislehurst, BR7 5SN	<p>8.1 The owner covenants that subject to receiving from the Council the Primary Healthcare Contribution Notice it will pay the Primary healthcare Contribution in accordance with clause 8.2.</p> <p>8.2 The Owner covenants: to pay the Primary Healthcare Contribution of £163,000 in three instalments - £55,000, £55,000 and £53,000. The Council undertakes to a) spend the Primary Healthcare Contribution only on the provision of primary healthcare facilities within the London Borough of Bromley and within a 3km radius of the Land and to consult the Bromley Primary Healthcare Trust on the expenditure of the Primary Healthcare Contribution; and b) return to the payer any unexpended part of the Primary Healthcare Contribution on the fifth anniversary of payment.</p>	£163,000 to spend only on the provision of primary healthcare facilities within the London Borough of Bromley and within a 3km radius of the Land and to consult the Bromley Primary Healthcare Trust on the expenditure of the Primary Healthcare Contribution;
180	James Dixon School site, Anerley Park	<p>The developer covenants with the Council that it will pay the Council the Health Contribution on or before the Payment Date.</p> <p>The Council covenants with the developer that it will not utilise the Health Contribution other than towards the provision of health services within the London Borough of Bromley.</p> <p>The Council covenants with the Developer that if the said Contribution or any part thereof shall not have been expended within the five (5) years after the date upon which it shall have been paid then the Council shall give upon written request by the Developer a written statement within 3 months of its proposals to expend any unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the contribution has been spent.</p> <p>The Council agrees with the Developer that the Council will repay any sums not spent or contractually committed within 5 years to the Developer within one month of the end of the 3 month period referred to above.</p>	£26,496 towards the provision of health services within the London Borough of Bromley.
197	Orpington Halls, High Street Orpington	The Owner agrees with the Council that it will pay the Healthcare Contribution to the Council within 3 months from the Commencement Date to be used towards the provision of healthcare services to the local community in the vicinity of	£13,243 towards the provision of healthcare services to the local community in the vicinity of Orpington and for no other purpose.

Planning Ref	Development	S106 Agreement Clause	Amount & what the money should be spent on
		<p>Orpington and for no other purpose. The Council shall after 5 years from the Commencement Date give upon written request by the Owner a written statement within 3 months of receipt of the written request of its proposals to expend any unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the Health Care Contribution has been spent. The Council agrees with the Owner that the Council will repay any sums from the Health Care Contribution not spent or contractually committed within 5 years from the Commencement Date to the Owner within one month of the end of the 3 month period referred to above.</p>	
214	Anerley School for Boys, Versailles Road, Penge	<p>The Developer agrees with the Council that it will pay the Healthcare Contribution to the Council within 3 months from the Commencement Date to be used towards the provision of health and medical services to the local community and for no other purpose. The Council agrees with the Developer to use the Healthcare Contribution only for the reason set out in the paragraph above and for no other purpose. The Council shall after 4 years from the Commencement Date give upon written request by the Developer a written statement within 3 months of receipt of the written request of its proposals to expend any unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the Healthcare Contribution has been spent. The Council agrees with the Developer that the Council will repay any sums from the Healthcare Contribution not spent or contractually committed within 4 years from the Commencement Date to the Developer within one month of the end of the 3 month period referred to above.</p>	£105,780 towards the provision of health and medical services to the local community and for no other purpose.
218	The Partridge, Chipperfield Road	<p>The Owner covenants with the Council to pay the Healthcare Contribution to the Council on or before the Payment Date to be used towards the provision of health and medical services to the local community in the London Borough of Bromley and for no other purpose. The Council agrees with the Owner to use the contribution only for the reason set out in the paragraph above and for no other purpose. The Council shall at the end of the Specified Period (being 5 years from the payment date) give upon written request by the Owner a written statement within 3 months of receipt of the written request of its proposals to expend any unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the Health Care Contribution has been spent. The Council agrees with the Owner that the Council will repay any sums not spent or contractually committed within the Specified</p>	£13,244 towards the provision of health and medical services to the local community in the London Borough of Bromley and for no other purpose.

Planning Ref	Development	S106 Agreement Clause	Amount & what the money should be spent on
		Period (being 5 years from the payment date) to the Owner within one month of the end of the 3 month period referred to above.	
223	Anerley School for Boys, Versailles Road, Penge	If the Developer receives a written request from the Council within 2 years following the Commencement Date in which the Council – request payment of the Healthcare Contribution. Covenants to use the Healthcare Contribution only for the provision of health and medical services to the local community and for no other purposes. Undertakes that if or to the extent that the Healthcare Contribution shall not have been applied by the Council in accordance with the above paragraph within 4 years after payment shall have been made to the Council then the Council shall on such date repay to the Developer such sum as shall not have been so applied together with any interest at the base rate from time to time of Lloyds Bank TSB plc from the date of payment to the Council pursuant to this clause to the date of repayment.	£75,768 for the provision of health and medical services to the local community and for no other purposes.
227	Land rear of Nugent shopping park, Cray View Close, Orpington	Contributions towards healthcare provision required in relation to residential development	£7,695 towards healthcare provision required in relation to residential development
228	Land at former 1-23 Orchard Grove Orpington	The contribution towards the provision of health care facilities in the London Borough of Bromley.	£98,240 towards the provision of health care facilities in the London Borough of Bromley.
230	Enterprise House, 45 Homesdale Road	<p>To pay the Contribution to the Council on or before the Payment Date to be used towards the provision of health and medical services to the local community and for no other purpose.</p> <p>The Council shall after 5 years from the Specified Period give upon written request by the Owner a written statement within 3 months of receipt of the written request of its proposals to expend any unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the Health Care Contribution has been spent. The Council agrees with the Owner that the Council will repay any sums not spent or contractually committed within the Specified Period (being 5 years from the payment date) to the Owner within one month of the end of the 3 month period referred to above.</p>	£84,296 towards the provision of health and medical services to the local community and for no other purpose.
233	Garrard House, 2-6 Homesdale Road	<p>The contribution of £35,000 to be used towards the provision of health facilities within the London Borough of Bromley.</p> <p>The Council covenants with the Developer as follows: - To apply the Contribution and any interest accrued thereon towards the purposes specified in the agreement and for no other purpose and To refund the Owner any portion of the Contribution which has not been expended</p>	£35,000 towards the provision of health facilities within the London Borough of Bromley.

Planning Ref	Development	S106 Agreement Clause	Amount & what the money should be spent on
		<p>within five years from the date of payment together with any interest accrued thereon at the rate from time to time prescribed under Section 32 of the Land Compensation Act 1961 from the date of payment by the Owner to the date of repayment by the Council.</p>	
237	Oatlands 210 Anerley Road Penge	<p>Prior to the commencement of the Development on the site the owner shall pay to the Council the sum of £26,270 as a commuted sum towards the provision of additional health care necessitated by the Development.</p> <p>The Council shall at the end of the specified period (being 5 years from and including the payment date) give upon written request by the Owner a written statement within 28 days of its proposals to expend unallocated sums or alternatively shall issue a certificate signed by the Council's Director of Resources certifying that the contribution has been spent.</p> <p>The Council agrees with the Owner that the Council will repay any sums not spent or contractually committed within the Specified Period (being 5 years from and including the payment date) to the Landowner within one month of the end of the 28 day period referred to in the paragraph above.</p>	£26,270 towards the provision of additional healthcare necessitated by the development.
274	Denton Court 60 Birch Row	<p>To pay the Healthcare contribution to the Council within 14 days of the completion of the first sale of any market dwelling. Healthcare contribution means the sum of £40,797, to be spent on healthcare in the London Borough of Bromley.</p>	£40,797 towards healthcare in the London Borough of Bromley.

Appendix two: Part 2 Financial Implications

The contents of this appendix will be considered under exempt proceedings for both the Care Services PDS agenda and the Executive agenda.

Report No.
ES14062

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: EXECUTIVE

for Pre-Decision Scrutiny by:

Care Services PDS Committee on 26th June 2014

Education PDS Committee on 2nd July 2014

Date: 16th July 2014

Decision Type: Non-Urgent Executive Key

Title: TRANSPORT GATEWAY REVIEW

Contact Officer: Dan Jones, Assistant Director Street Scene and Green Space
Tel: 0208 313 4211 E-mail: Dan.Jones@bromley.gov.uk

Chief Officer: Executive Director of Education, Care and Health Services

Ward: (All Wards);

1. Reason for report

- 1.1. The report follows the Executive report Adult Social Care – Gateway Review (report no. CS13/017) and the Executive endorsed Commissioning Programme (Report No. DRR13/043), of which Transport was one of the ten services to be reviewed. This report is part of the agreed Gateway Process for determining the best method for the delivery of these services in accordance with the Council's Target Operating Model.
- 1.2. The current Passenger Transport Framework Agreement, utilised by Bromley for the delivery of transport by the Special Educational Needs Transport (SENT) team, is due to expire in August 2015. The current vehicle hire agreement for the delivery of the Passenger Transport Services (PTS) has been extended to November 2015. The combined delivery of these two services after August 2015 needs to be market tested to ascertain if significant costs savings can be realised by contracting either elements or holistically delivering these services through alternative means.
- 1.3. Transport was identified as one of the first ten service areas to be reviewed by the Commissioning Board and this review focused on transport activities undertaken or commissioned by the Education and Care Services Department for adults, predominantly the activities of the PTS, and for children, predominantly the activities of the SENT team.

- 1.4. As part of the service review, these services have been soft market tested, including discussions with the service managers, and permission is being sought to formally go to the market to for the delivery of these services in order to determine the best value option.
 - 1.5. The proposed contract(s) have a potential value of £5.8m per annum and therefore this exercise will be required to follow European Union public procurement regulations and the placement of a Contract Notice advertisement in the OJEU seeking expressions of interest from organisations wishing to tender as required.
-

2. RECOMMENDATION(S)

- 2.1. The Executive is asked to approve the tendering of contract(s) for the provision of transport services for adults and children as outlined in paras 3.28 – 3.30 and to agree to the placement of any required Notice of advertisement in the OJEU, seeking expressions of interest from organisations wishing to tender.**

Corporate Policy

1. Policy Status: Existing Policy:
 2. BBB Priority: Children and Young People and Supporting Independence:
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: 813006, 845030, 136586, 136587, 845000, 845900
 4. Total current budget for this head: £5,795kk
 5. Source of funding: RSG and DSG
-

Staff

1. Number of staff (current and additional): 57 posts / 46.1 FTE
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: Statutory Requirement:
 2. Call-in: Applicable:
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Current: 525 Adults & 818 Children (SEN)
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1. In the report to the Executive (DRR13/043), Transport services was identified by the Commissioning Team as one of the first service areas to review in order to assist the Council in delivering its Target Operating Model as a "... Commissioning organisation, determining who is best placed to deliver high-quality services based on local priorities and value for money principles".
- 3.2. As part of the agreed Gateway Process of the Commissioning Programme, this report forms part of Stage 4 of the process to ensure that the implementation decision follows the appropriate committee process.
- 3.3. Staff have been made aware through the Commissioning Programme process that this service is being reviewed and that soft market testing was undertaken. Further staff engagement and communication will be undertaken as part of this process by the service management team to ensure that all staff are briefed on the progress of this project.
- 3.4. Currently the London Borough of Bromley provides transport services for three reasons:
 - a) as a means of facilitating respite for carers;
 - b) to allow individuals to access social interaction; or
 - c) to provide access to education

Adults:

- 3.5. In the current system, the transport service takes users to and from day centres as part of provision of sociable day opportunities. Day activities are usually a response to two assessed needs, either A or B as above.
- 3.6. One or both may apply depending on the individual situation. The future provision of access to adult transport will be governed by an agreed transport policy.
- 3.7. Transport for adults is not an explicit statutory duty in itself, however, the Council must provide for adequate day opportunities for those assessed as needing respite or social interaction under 'Substantial' and 'Critical' Fair Access to Care Services (FACS) criteria. Under the current perspective of Care Services for respite in particular, this involves the Council facilitating individuals to get out of their homes, which requires an element of transport. The duty can be met indirectly through Direct Payments or directly by the providers of the day opportunities.

Children:

- 3.8. The LA has a statutory duty to make free home – school travel arrangements for eligible children to access their education, both SEN (Special Educational Needs) and non-SEN children, and this was the reason for Council-funded transport for children originally. The legislation underpinning the service provided still reflects this 'access to education' priority.
- 3.9. A child is obliged to attend the school nearest to their home where the local authority assesses that their education needs can be met.

For SEN this is to their specialist provision named in their statement / (to be) Education Care & Health plans. The manner in which these arrangements are made are determined by the LA but must be suitable taking into account the age, ability and needs of the child, this may be a mainstream class, a SEN unit at a mainstream school, or a Special School.

The duty is extended, to non-SEN schools, including parental choice of school based on religious grounds, depending on age and home to school distance, for some eligible children from low income families; e.g. in receipt of free school meals and or highest working Tax Credit benefit.

In Oyster card zones this can be public transport as long as the journey is not too arduous and does not on average take longer than 45 minutes for primary school age and no longer than 75 minutes for secondary school age pupils.

- 3.10. The local authority is required by statute to provide transport to children (both SEN and mainstream) if the nominated best school is beyond guideline distances (2 or 3 miles, depending on age), and regardless of these distances if the child has a disability such that support is necessary.
- 3.11. The statutory requirements are more complex after school leaving age (16, 18 or 19 depending on the individual school) meaning that the local authority only needs to fund transport for those young people whose families' income falls below a threshold.
- 3.12. Statutory transport obligations to mainstream children are met overwhelmingly through Transport for London and free Oyster travel. The main source of principal demand for the children's transport service is SEN, although there are also a number of subsidiary users of transport for children, namely children's disability respite and Looked After Children.

Current management arrangements:

- 3.13. The existing management provision for these two distinct service areas are integrated, being directly managed by the Passenger Transport Operations Manager and operating out of the Central Depot.
- 3.14. The functions of the Passenger Transport Service (PTS) are principally around delivery of the transport service that is requested by Older People or Learning Disability care management, with appropriate route planning to ensure optimal routing efficiency within parameters is maintained.
- 3.15. The in-house PTS uses 20 vehicles leased from a single provider. The daily pattern begins at 8am, first delivering Learning Disability clients to day opportunity venues, followed by Older People clients. Most buses return to the Depot by 11.30am. The sequence is reversed commencing at around 2.30pm. Buses return to the Depot between 4.30 and 6pm. The drivers are employed throughout the day while passenger attendants are not employed during the middle hours of the day. A number of the buses may be used for additional work during the middle hours of the day, such as transferring individual clients to nursing homes or returning them from hospital.
- 3.16. Children's transport is arranged through outsourcing to providers on a framework jointly let by Bexley and Bromley, which is due to expire in August 2015, and primary functions of the SEN Transport Team are around contract management, eligibility assessment and demand management, as well as close contact and co-ordination of delivery elements, including efficient route management. There are currently 12 service providers utilised by the service to operate 252 routes which transport 818 pupils. Within the service, there are 219 listed locations that service users may access and the peak operating times are term-time from 7:00am to 9:00am and 3:00pm to 4:30pm.

3.17. A further bus service operates at The Phoenix Pre School four days per week in the morning and afternoon only, during school term time. The school buses are donated by The Friends of The Phoenix Pre School and owned by LBB. All maintenance costs and staff costs are funded from the SEN Transport budget.

Transport review and soft market testing:

3.18. The scope of the Transport Review and associated assessment of service requirements was informed by and considered the Best Practice Guidance issued by the Department of Transport *Tendering Road Passenger Transport Contracts* – October 2013. The recommendations made align with the best practice arrangements it identifies as appropriate for the activities the Council carries out.

3.19. The soft market testing exercise performed as part of the Transport review and was not fully conclusive on what service delivery model would best suit the changing demands of transport requirements for these services.

3.20. Further efficiency in transport operations may be achieved through the successful integration of these two service models, with the primary transportation delivery being through the use of large capacity vehicles (Bus Model). However, the use of large specialist vehicles by private companies also has the risk of the company not being able to generate commercial income when vehicles are not in use, thus potentially raising costs.

3.21. Alternatively, the use of saloons, estates and MPVs could be used, as similar to the current framework contract used for SEN transport, to competitively deliver a large element of the transport requirement for Adults and Children by private sector business (Taxi Model).

3.22. The adults' system has been designed on a 'bus model' basis for many years. The destinations (day centres) are limited in number (10-15) and the vehicles used are large 11-seat plus wheelchair capacity buses. A passenger attendant is present on all journeys to look after service users and to ensure passengers are not left unattended during pick-ups/drop-offs, but practicalities limit the average number of passengers scheduled per route to 6. Also, there are 'down times' in the middle of days, in evenings and at the weekend when the vehicles are not productive.

3.23. Children's SEN transport has just fewer than 10 routes using minibuses with very high volumes (10-15 passengers). Quite a large number of routes have 5 or 6 passengers. There are also a large number of routes with 1-3 passengers. The average passenger number is approximately 4. The children's system can be categorised as part 'bus model' and part 'taxi model'. Besides simple passenger numbers, the key distinction, as outlined, is whether the vehicle used for the council contracted work is then used for commercial work. Only the lower volume range of SEN routes conform to this 'taxi' definition; soft market testing has shown that providers of routes with 5 or 6 passengers particularly in specialist vehicles can struggle to use these vehicles in the remainder of the day.

Further, the successful SEN Invest to Save programme focusing on travel training has seen a reduction in those requiring transport and a shifting expectation around need.

3.24. The fragmentation of transport solutions is likely to occur in the future because of a combination of personalisation and a possible policy direction away from building-based day opportunities to 'community-based activities'. People may choose to access a personalised solution nearer to their own community instead of travelling to a centralised day centre they used to attend. Scaled up, this is likely to mean shorter journeys with fewer passengers, and a preference for greater flexibility in any procurement solution. The conclusion is that the future requirements are moving toward the 'taxi model' with a smaller element fitting a 'bus model' scenario.

- 3.25. The SEN service has established limits for journey times and routing options are designed to ensure journeys for children of Primary School age do not exceed 1 hour and children of Secondary School age do not exceed 1 hour and 15 minutes. The Adults transport service does not have a statutory journey time limit, but the service attempts to limit journeys to no longer than an hour. Future developments and policy changes will impact on how these two service areas can be integrated which will influence the optimal procurement options available.
- 3.26. It is important to note that by its very nature, the potential use of smaller vehicles as a service delivery option is likely to encourage local and SME participation, while also allowing for the delivery of the service from locations nearer to the recipient's place of residence.
- 3.27. Under the Public Services (Social Value) Act 2012, consideration will need to be made based on the economic, environmental and social benefits of the procurement approach at a pre-procurement stage which precedes the issuing of the official notice in OJEU. This evaluation will apply to any public services contract or framework agreements to which the Public Contracts Regulations 2006 apply.

Procurement options:

- 3.28. The various procurement methods that we recommend in order to enable the flexible procurement of transport provision to meet changing demands for these services are:
- A) Combined Contracts with 'Lots' - Re-procurement of current children's non-volume guaranteed framework, with some or all of adults' transport in addition. Sourcing all transport routes through a framework, if it is achievable in terms of capacity and cost, would be the optimal solution because of the flexibility offered.
 - B) Separate Contracts - It cannot be assumed that a non-volume guaranteed framework can provide for all adult transport and / or transport which require specialist equipment, so the procurement of a fixed contract for a core service delivering complex transport solutions may be required.
 - C) Single Contract - The procurement of all journey requirements together including the co-ordination and route planning – "wholesale commissioning". This option has not been tested for viability in terms of operational efficiency to ascertain if a market provider has the capacity to be able to deliver the flexible service model LBB requires of its developing transport service.
- 3.29. An additional purchasing solution may potentially be the use of a Dynamic Purchasing Solution (DPS) to facilitate the purchase of the elements identified in the above table that would be procured through a framework type arrangement which also provides for ongoing competition and the ability to add new providers to the approved supplier list post implementation. An additional procurement option could be the use of E-Auctions for the procurement of identified transport routes. This would need to be assessed against the provision of a DPS as there are many similarities.
- 3.30. Therefore, it is recommended that the services are offered to the market as set out in Table 1 below. This would enable providers to tender on their preferred modus operandi whilst allowing for the various options to be considered in competition.

Table 1. Potential procurement matrix – FW: Framework; FC: Fixed Contract; IH: In-House

Procurement Option	SEN Specialist Transport (Lot 1)	SEN Standard Transport (Lot 2)	Adults Specialist Transport (Lot 3)	Adults Standard Transport (Lot 4)	Transport Coordination and Route Planning
A	FW	FW	FW	FW	IH
B1	FW	FW	FC	FW	IH
B2	FC	FW	FC	FW	IH
C	FC	FC	FC	FC	FC

- 3.31 In terms of realising further efficiencies through the joint procurement of services with other neighbouring authorities, officers will continue to explore these options. We have met recently with LB Croydon and LB Bexley to discuss the potential opportunities for the joint procurement of multiple services to gain further service efficiencies. The consensus was that until strategies for the procurement and future service delivery models and strategies are realised and consistent, it was premature to make a commitment by any party at this time.
- 3.32. It is intended that the arrangement will run for a period of 4 years. The evaluation of tenders submitted will be completed in line with the Councils standard process and be completed on a 60/40 cost to quality basis which incorporates minimum quality thresholds in the assessment of the quality factors used.
- 3.33. As part of the procurement process, consideration will be given to the resourcing requirements to ensure a robust client management arrangement is in place. This includes contract monitoring, performance management and quality assurance consistent with the Council's COP.

4. POLICY IMPLICATIONS

Any future or developing policy changes to the access guidelines for service users or the method of operation may have an impact on the provision of transport and any associated costs.

5. FINANCIAL IMPLICATIONS

- 5.1 Adults and SEN transport services cost the Council approximately £5.8m.

Total controllable budget

Children's	£3,964k (of this £330k is Dedicated Schools Grant backed)
Adults	£1,831k
Total	<u>£5,795k</u>

Any savings and efficiencies that may arise from this process will need to be fed into the medium term financial strategy. There are currently no budget savings factored into these areas and they are unlikely to be identified at this early stage. Once the tender process has been completed and analysis of the bids have been carried out a report will come back to this committee and provide the detailed information.

6. LEGAL IMPLICATIONS

- 6.1 The 2014 EU Public Procurement Directives were approved by the European Parliament on 15 January 2014 and by the EU Council on 11 February 2014. These Directives were published in the Official Journal of the EU on 28 March 2014 and came into force on 17 April 2014. EU member states have 2 years to implement them in national legislation.
- 6.2 The Council are required to comply with the Council's Financial Regulations and Contract Procedure Rules and the current Public Contracts Regulations 2006 (as amended). It appears that these have been considered in this report and recommendation.

7. PERSONNEL IMPLICATIONS

- 7.1. If Members agree to the recommendation to proceed with tendering, staff and their representatives will be engaged and consulted as early as practicable at each stage of the formal consultation process with staff and their representatives going forward, subject of course to any commercially sensitive information. There will also be engagement with services users and their representatives who might be affected by the proposals.
- 7.2. Any staffing implications arising from the recommendations in this report will need to be carefully planned for and managed in accordance with Council policies and procedures with due regard for the existing framework of employment law. The tendering process would consider whether or not the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) as amended by The Collective Redundancies and Transfer of Undertakings (Protection of Employment) (Amendment) Regulations 2014.

Non-Applicable Sections:	None
Background Documents: (Access via Contact Officer)	Commissioning Team Programme Budget - Report No. DRR13/043 Adult Social Care – Gateway Review (Report No. CS13/017)

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Report No.
CS14066

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Executive

**For Pre-Decision Scrutiny by Care Services PDS Committee
on 26th June 2014**

Date: 16th July 2013

Decision Type: Non-Urgent Executive Non-Key

Title: CORPORATE PARENTING STRATEGY

Contact Officer: Kay Weiss, Assistant Director ECHS
Tel: 020 8313 4146 E-mail: kay.weiss@bromley.gov.uk

Chief Officer: Terry Parkin Executive Director, Education and Care Services

Ward: Boroughwide

1. Reason for report

- 1.1 The aim of the multi-agency corporate parenting strategy is to build services around the needs of children and young people in the care of Bromley Council in order to maximise their opportunities and improve outcomes. The vision of the strategy is simply stated: we want for our looked after children everything that a good parent wants for their child.
 - 1.2 Members are asked to review and comment on the strategy prior to it being presented to full Council in July 2014.
-

2. **RECOMMENDATION(S)**

- 2.1 **The Care Services PDS is asked to note and comment on the attached corporate parenting strategy.**
- 2.2 **The Executive are asked to approve the corporate parenting strategy in advance of it being presented to Council in July.**

Corporate Policy

1. Policy Status: Existing Policy
 2. BBB Priority: Children and Young People:
-

Financial

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

Staff

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

Legal

1. Legal Requirement: Guidance
 2. Call-in: Applicable:
-

Customer Impact

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

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

- 3.1 This strategy sets out how Bromley Council and its partner agencies intend to carry out their corporate parenting responsibilities for looked after children, young people and care leavers.
- 3.2 The strategy sets out our vision and strategic priorities to improve outcomes for looked after children in Bromley for the period 2014-2015. It identifies the key areas of focus together with the planning and governance arrangements to achieve them. The strategy is underpinned by the service business plan, related strategies for placements and care planning and various work streams within the council
- 3.3 Bromley Council is committed to doing all it can to provide high quality services that promote good outcomes for children and young people. As an authority, Members accept the responsibilities and challenges of being corporate parents, and by working together, we are confident that we can meet the needs of our looked after children, young people and care leavers.
- 3.4 Looked after children and young people are individuals who come from all walks of life and have very different aspirations, ambitions and identities. We acknowledge that they are a highly vulnerable group who require additional support and specialist services to achieve and become socially and economically independent adults. Our commitment is to support them to achieve their full potential and to celebrate their successes.
- 3.5 The attached strategy has been developed with input from members of the corporate parenting strategy group and endorsed, following some minor amendments, by the Executive Working Party for Safeguarding and Corporate Parenting on the 29 April 2014.

Non-Applicable Sections:	FINANCIAL PERSONNEL POLICY LEGAL IMPLICATIONS
Background Documents: (Access via Contact Officer)	

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Corporate Parenting Strategy 2014 - 2016



Delivering the best outcomes for children in care

Foreword

In Bromley we rightly take pride in our services for Children in Care and Care Leavers.

Our dedicated Looked After Children's Team and Leaving Care Team are staffed by an experienced and stable group of social workers and personal advisors, working alongside our education and health colleagues.

We have developed a London Borough of Bromley Pledge and written a set of Placement Promises that provide a benchmark against which our provision for children and young people can be measured.

As Children's Services throughout the country face a period of financial constraint and adjustment, we are thinking carefully about our priorities, how we can continue to provide an excellent standard of care that places children and young people at the heart of all that we do and fulfil our corporate parenting duties.

For example, we want to help our care leavers make the most of opportunities through supporting and developing initiatives that can help them become secure, productive and economically independent members of our society. We want to make sure that social workers spend more time with children and the people looking after them and less time in front of computers and on data collection. We want to make sure that children in our care feel that they have a say in how their lives are planned and organised.

We know that all the children we are responsible for as corporate parents are unique individuals and that the way we provide our services must, as far as possible, take this into account. We know for example that whilst some children in care want to be invited to help shape services, many don't. They simply want to be able to get on with their lives in the same way as other children do, without the perceived stigma of being in care.

As corporate parents the question we should ask ourselves is - 'if this child were mine, what would I want for them?' This is the unique challenge faced by all of us with a responsibility to provide a service for children in our care. We hope that this document will provide you with some insights as to how we aim to fulfil this vital role.

Cllr Stephen Carr
Lead Member

Terry Parkin
Director of Education, Care and Health Services

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Corporate Parenting

Introduction

Looked after children, young people and care leavers continue to be recognised as a vulnerable group in society, despite the attention over recent years towards improving outcomes for them. We recognise that looked after children, young people and care leavers are particularly disadvantaged and will need additional support and specialist services.

This strategy sets out how Bromley Council and its partner agencies intend to carry out their corporate parenting responsibilities for looked after children, young people and care leavers.

The purpose of this strategy is to set out our vision and strategic priorities for services for looked after children in Bromley for the period 2014-2015. It sets out the key areas of focus from the strategic priorities together with the planning and governance arrangements to achieve them. The strategy is underpinned by the service business plan, related strategies for placements and care planning and various work streams.

Bromley Council is committed to doing all they can to provide high quality services that promote good outcomes for children and young people. As an authority, we accept the responsibilities and challenges of being corporate parents, and by working together, we are confident that we can meet the needs of our looked after children, young people and care leavers.

Looked after children and young people are individuals and they come from all walks of life and have different aspirations, ambitions and identities. Our commitment is to support them to achieve their full potential and to celebrate their successes.

Looked after Children, Young People and Care Leavers

The term looked after children, young people and care leavers applies to all children being looked after by Bromley Council, including those children subject to a Care Order under Section 31 of the Children Act 1989 as well as those children looked after on a voluntary basis through agreement with their parents under Section 20 of the Children Act 1989. This group includes looked after disabled children, young people and care leavers as well as those children who have sought refugee status in the UK.

Key Legislation, Legal and Policy Framework

The concept of the corporate parent has been developed through legislation, policy development and guidance and includes:

- The Quality Protects programme (1988)
- Children Act 1989
- Children Act 2004
- The Children (Leaving Care) Act 2000
- Adoption & Children Act (2002)
- If this were my child – A Councillor’s guide to being a good corporate parent (2003)
- Every Child Matters (2003)
- Promoting the Educational Achievement of Looked After Children : Statutory Guidance for Local Authorities –Children Act (2004) -updated 2010

- Working Together to Safeguard Children (2013)
- Care Matters : transforming Lives of Young people in care
- Making the Difference – Putting the care back into corporate parenting (2007)
- Care Matters: Time to deliver for children in care (2008), Children & Young Persons Act (2008)
- Securing Sufficient Accommodation for Looked After Children (2010)
- Care Leaver Strategy (2013)

What is Corporate Parenting?

Bromley Council aims to support the majority of its children and young people within their own families and communities. For a small number of children this is not always possible and they require alternative care.

The term **Corporate Parenting** is used for the collective responsibility of the whole Council, elected Members, employees and partner agencies to ensure the best care and protection of children and young people looked after, as well as care leavers.

All agencies within the Local Authority have a responsibility and a role to play in promoting positive outcomes in the lives of children and young people who are looked after.

Governance arrangements

The Executive Working Party for Safeguarding and Corporate Parenting meets each quarter and its main function is to oversee the Corporate Parenting Strategy to ensure outcomes fulfil the Council's responsibilities towards Looked After Children. Within the membership of the Executive Working Party is the Portfolio Holder for care services, education and public protection and safety. Each portfolio lead also sits as a member of the Council Executive and decides upon the wider strategic council priorities. Members of the living in care council (LinCC) attend and provide Members and Officers with updates on the work they are undertaking.

The focus of the working party includes:

- Championing the corporate parenting role and function across the council with Members, officers and partner agencies
- Monitoring and overseeing plans, strategies or policies for looked after children, young people and care leavers to ensure performance and ambition is maintained
- Disseminate and discuss relevant policies and research pertinent to looked after children, young people and care leavers
- To monitor and review key performance indicators so that they are achieved
- To highlight areas of good practice as well as review complaints

- To ensure that looked after children, young people and care leavers are able to participate in decisions about their care and the shaping and delivery of future services and to report on this progress on an annual basis

In addition to the Executive Working Party, strategic and operational matters are governed by the Corporate Parenting Strategy Group.

The Corporate Parenting Strategy Group is chaired by the Assistant Director – Children’s Social Care. Other members of the Strategy Group are represented by lead professionals from agencies within Bromley and their partners. This includes the:

- Head of Service for Care and Resources
- Group Manager’s for Looked After Children and Care Leavers
- Group Manager for Fostering and Adoption
- Head Teacher – Bromley Virtual School
- Paediatric Health Advisor
- Public Health Consultant
- Operational Manager - CAMHS
- Group Manager – IRO Service
- Looked After Children’s Nurse
- Commissioning Manager for Looked After Children
- Lead Officer for Performance Improvement
- Active Involvement Officer
- Research and Statistics Manager
- Children’s Social Care Policy Officer

The purpose of the group is to develop the necessary work streams across all partner agencies.

Our vision and Priorities as Corporate Parents

Our Vision

Our vision underpinning the Bromley corporate parenting strategy is simple - we want our children and young people to have everything that good parents want for their children.

We want our looked after children and young people to work with us, along with their parents and carers, in shaping how we manage and organise the planning, resources and services that support and care for them.

We want our children and young people to be happy and healthy, both physically and emotionally, to be safe and protected from harm and exploitation, and to be supported each step of the way to adult life.

We want them to achieve their potential, especially at school, to make the most of the learning opportunities they are offered and to participate in the decisions affecting their care and their lives. This includes making the transition to adulthood with continuity of support, access to good jobs and higher education, while living in good housing and being financially secure.

Our Strategic Priorities for 2014 – 2016

Our priorities are to ensure:

- Securing permanency for looked after children at the earliest opportunity
- Improve placement stability and the number of moves children and young people experience
- Improve the involvement of children and young people in shaping services that positively enhance their care plans to improve their life chances
- Develop commissioning arrangements to promote good outcomes and achieve best value
- Improve education outcomes and ensure that young people have access to education, employment or training post statutory education
- Celebrate and value our looked after children's achievements, to build self confidence and esteem

- Ensure that children and young people have timely access to a range of appropriate services that support their health needs, including emotional and mental health needs
- Enhance elected Member and officer involvement in delivering the strategic priorities

Involving Looked After Children and Young People in Shaping and Delivering Services

Listening to Looked After Children Young People and Care Leavers:

Bromley Council is committed to listening and taking account of the views of the children we work with to make sure that their views influence how services are planned. Whilst there has been limited success in consulting with our looked after children and young people we aim to strengthen this area of work in 2014/15.

The work programme for the active involvement officer will be reviewed to increase the range and type of activities that can harness the wider views of all of our looked after children in a systematic way. The Corporate Parenting Strategy Group will take responsibility for identifying areas for research and collate the information to improve service development and delivery.

The Living in Care Council (LinCC)

We acknowledge and welcome that the views of our children and young people in care and care leavers play a crucial role in the range of services that we deliver to support them reach their full potential. The Living in Care Council has been established to act as a vehicle that brings together the voice of our looked after children as well as a group that can actively assist with the design and development of services and resources.

Membership of the Living in Council is open to all looked after children, young people and care leavers.

The Living in Care Council will continue to be a key group in assisting the Council in delivering its corporate parenting objectives. The group will undertake specific tasks and projects on behalf of all our looked after children and young people and continue to represent Bromley at various national forums.

Work will be undertaken in 2014/15 to strengthen and increase the size of the living in care council so that it is more representative of the general looked after population.

Involving Children and Young People

We understand that there will be some looked after children, young people and care leavers who do not wish to commit to being part of the living in care council due to other commitments or interests they may have but who would like to contribute to service design or delivery in a different way. We will continue to train and support young people so that they can contribute to recruitment and staff selection, and to deliver training and information to prospective foster carers. In addition, we will explore further opportunities for children and young people to be involved in specific activities that promotes their needs to the widest possible audience of partners involved in delivering services for and on behalf of them.

Total Respect

The Total Respect training programme is a course aimed at staff and others who work with looked after children, young people and care leavers to help them understand and acknowledge the importance of a child's right to participate in the decisions and plans that affect their lives and the services they receive.

We aim to introduce this programme during 2014/15.

The training programme will be delivered by a group of looked after young people and care leavers with the support of an active involvement officer following comprehensive training.

In addition, we will consider how children and young people can develop and deliver additional training to assist with a greater understanding of what 'corporate parenting' means and entails.

Delivering the Corporate Parenting Strategy

The Corporate Parenting Strategy Group will be responsible for ensuring that policy and strategy are turned into service delivery. The group is overseen by children's social care and is made up of key representatives from partner agencies.

The Corporate Parenting Strategy Group will ensure that the roles, function and contributions of individual stakeholders are widely understood to deliver the strategy.

The principle objectives of the group are:

- To develop and promote a range of resources and opportunities available from or wealth of community networks to promote and develop our looked after children and care leavers;
- To develop and monitor a comprehensive work programme to develop practice and take forward service development to promote the outcomes and opportunities for our looked after children and care leavers;
- To develop a corporate parenting training programme for Elected Members to understand and develop their roles and responsibilities as corporate parents;
- To collate emerging issues and feedback to relevant management teams to support service development

Elected Members

All Elected Members have to ensure that public services used or required by children and young people in care are of a high quality, integrated and take account of need. They must ensure they are fully informed of the issues facing children in care by understanding their characteristics and by knowing how well services are performing in meeting their assessed needs. This requires an awareness and understanding of:

- Care and placement arrangements
- Child protection and safety policies and procedures
- Education performance and achievements in school
- Further and Higher Education, training and employment achievements
- Responsiveness of health services
- Preparation for leaving care arrangements and housing needs
- Arrangements to prevent children in care from getting into trouble
- Elected Member participation in the fostering and adoption panels

Elected Members will be supported in meeting their responsibilities by relevant council officers. They will provide leadership that will encourage and support partnership and joined-up working. This will ensure that funding, commissioning and priority setting deliver the best combination of services for children and young people in care and care leavers.

Senior Managers

The Council's senior management team will ensure that the needs of our looked after children are actively considered when shaping and delivering council services. Senior Managers also have a responsibility to ensure that the ambitions and commitment to the needs of our looked after children are fully articulated and acted upon.

Foster Carers

Foster Carers will be assessed, approved on an annual basis, supervised and supported to ensure that they:

- Provide a safe, secure and comfortable home for the children and young people they care for
- Give children and young people time and attention and clear boundaries
- Provide encouragement and motivation to help children and young people meet their potential
- Work positively with birth parents and other family members where appropriate
- Work in partnership with those who share responsibility for the child or young person's care, welfare and development
- Provide care that supports and promotes the child or young person's culture, race, religion, language, disability and sexual orientation.

This will apply equally to all carers including Bromley in-house foster carers, Independent Fostering Agency foster carers and children's residential social care staff.

Social Workers and other social care staff should:

- Ensure that each child and young person's needs are thoroughly assessed and that these are properly represented in their Care and Pathway Plans.
- Have the key role in care planning for children and young people in care and care leavers. First consideration will be given to returning the child or young person to their parents or other family members care when safe to do so. Where this is not achievable efforts will be made to secure the child with an alternative family such as adoption or foster care. Where a child or young person remains in care plans will also address leaving care arrangements.
- Listen to the views and wishes of the child or young person and those of their family members where appropriate. The views of those involved in providing services to children in care will also be sought.
- Ensure each child or young person is healthy and their health needs are appropriately assessed and met.
- Ensure each child or young person is safely and securely accommodated within formalised family arrangements or in appropriate care placements
- Ensure they have access to and are supported in a full range of educational services, whether this is in schools, colleges or specialist alternative provision

- Ensure they have access to leisure and sports facilities which enable their interests, skills confidence and self esteem to develop.
- Ensure that they make a smooth and successful transition from living in care to adulthood.

The Virtual School

The Virtual School for Children in Care is responsible for providing strategic direction and targeted support and securing successful educational outcomes for all children and young people in care and will:

- Support children and young people in care in School Years 1-13 which will include working with carers, Social Workers, Schools, Special Educational Needs, other Council teams and external agencies
- Monitor performance of educational attainment at Key Stages 2, 4 and 5 and the statutory completion of Personal Education Plans
- Facilitate Personal Education Plan (PEP) meetings
- Monitor and report on admissions, attendance and exclusions of children and young people in care
- Commission home tuition
- Provide transitional support over school summer holidays for those children moving from primary to secondary school
- Provide training for carers and for Designated Teachers
- and above all, improve the educational attainment of children and young people in care.

Teachers and Education Staff

All staff working in education, whether based in maintained schools, academies, free schools or local authority services have responsibilities towards children and young people in care. These responsibilities are clearly defined in the 'The Education of Young People in Public Care (DoH/DfES, 2000) and Statutory Guidance on the Duty on Local Authorities to Promote the Education of Looked After Children under Section 52 of the Children Act 2004' (DfES 2005). These responsibilities cover the following range of activities:

- Admissions to schools
- School transport
- Special Educational Needs and Inclusion
- School Improvement
- School Exclusions
- Education Welfare
- Educational Psychology
- Educational Support to Schools

The statutory duty does not directly apply to schools and their staff but there is an expectation that schools and their staff will 'take a proactive approach to co-operating with and supporting local authorities in discharging this duty' (DfES 2005). It is a statutory duty that all schools have an allocated Designated Teacher for Children in Care in post.

Health Sector Managers and Clinicians

The "Children Act 2008 - Promoting Health for Children in Care Guidance" sets out the responsibilities that health workers have towards children and young people in care. Chief Executives of NHS Trusts are charged with ensuring that health sector children's services are planned, commissioned and delivered in collaboration with other partner agencies, taking account of the particular health needs of children and young people in care and that priority is given to them. These are achieved by:

- Statutory guidance for Local Authorities and Primary Care/NHS Trusts
- A Designated Paediatrician and Specialist Nurse at Consultant level for children in care
- Practitioner nurses for both younger children in care and 16+ care leavers
- Initial and regular comprehensive health assessments (6 monthly for 0-4's, annually for 5-17's)
- A health plan with clear and comprehensive assessment of need, allocation of responsibility and expected timescale for action tailored to meet the individual needs of the child and young person in place for the first Child in Care Review
- Targeted health promotion services are in place and clear and effective systems for children and young people placed out of area
- Annual measurement by carer of emotional and behavioural health indicators for 4 – 16 yr olds using 'Strengths & Difficulties Questionnaire'. Where required follow up support from Educational Psychologist and CAMHS
- Strategic and service improvements to access to services such as CAMHS, sexual health, drugs/alcohol advice
- Effective information sharing across agencies ensures consistency in meeting the needs of children and young people
- A sexual health and substance misuse screening process forms part of the health assessment with young people and the 16+ nurse can provide outreach contraceptive services as required.
- An assessment and referral toolkit, 'You and Sex' has been developed and all young people over 13 years will be screened annually and provided with appropriate intervention.
- Accurate and prompt assessment of need with clear plans to address deficits in health & full health history gathering
- Working with carers and colleagues to build upon children's strengths and resilience factors

Conclusion

There is no single or simple answer to improving outcomes for all children and young people in care and care leavers and there is a need for thorough knowledge of the characteristics of the care population and a range of appropriate strategies. Our aim must be to ensure that our care and support and commitment to securing improved outcomes for children and young people in care and care leavers becomes fully and permanently embedded in the culture of children's and all council and its partner's services. There are few other specific issues of higher priority for the local authority than caring for the children and young people for which the London Borough of Bromley has a degree of parental responsibility.

Evaluation and Review of the Strategy

This strategy will be presented to the Executive Working Party for Safeguarding and Corporate Parenting in Autumn 2014 and will then be disseminated to all stakeholders. It will be evaluated and reviewed by the Corporate Parenting Strategy Board with the participation of children and young people in care and care leavers. The strategy will be further evaluated and monitored over the next 12 months and a progress review report will be made to the Executive Working Party for Safeguarding and Corporate Parenting in Spring 2015.

Appendix One

Our Guiding Principles in Delivering the Strategy

In developing our strategy we have identified nine underlying principles for our looked after children and young people:

- We will only promise you things that we know we can do and we will ensure that you know who is responsible for delivering these promises. If these promises are broken there will be a line of accountability which will end with the Portfolio Holder for Care Services and the Chair of the Living in Care Council.
- We aim to be good parents and will care for you as an individual.
- We will take account of your particular needs, especially those relating to disability, race, culture, religion and sexuality.
- We will take account of anything that is leading to you being treated unfairly and will give you support to overcome it, including anyone treating you unfairly because you are in care.
- We will always involve you in the decision we take for you at a level appropriate to your understanding. We will respect your right to make choices about your life. Our first priority will always be to make sure you are safe.
- You will have the opportunity to talk to your social worker alone every time he/she visits you.
- We want you to be healthy, safe, have fun and gain achievements for yourself. We want you to have stability in your life, to make a positive contribution to your community and to leave care able to make your way successfully in life. We will support you to achieve all this.
- We will have expectations of you as well and we will make these clear to you
- We will listen to you as individuals and as a group and we want you to tell us when you meet us whether we are keeping our promises.
- We will ensure that you receive your full set of rights, as set out in relevant legislation, regulations and guidance and the UN Convention on the Rights of the Child.

Placements - Standard Promises

As well as developing our underlying principles to support our work with you we have also developed some standard placement promises that every placement provider is required to sign up to.

Staying safe

We promise to:

- talk to you about safety and staying safe
- try our best to get to know who your friends are and who you spend time with
- actively try to locate you and contact you if you are missing

- encourage you to listen to and respect the views of others – this will sometimes mean challenging you
- make time to listen to you and talk to you
- encourage positive interaction and ways to bond
- nurture and care for you in placement

Staying healthy

We promise to:

- undertake discussions around sexual health/safe sex if required
- support you to make wise decisions about your life
- have an up to date appreciation of what matters to you
- be aware of your emotional health and be sensitive towards your needs
- take you to all medical appointments
- provide healthy food and snack options and encourage you to maintain a healthy lifestyle
- be as practically available for you as we can
- treat you in the same way as if you were our own children

Enjoying and achieving

We promise to:

- help with your homework
- let you have friends visit during acceptable hours after discussion and agreement
- find out about local groups and projects and support you to participate if you want to
- engage you in conversations about your aspirations: what you want your life to be like when you grow up

Making a positive contribution

We promise to:

- make every effort to give you information about the local community and to encourage you to participate
- encourage your awareness and appreciation of your cultural and ethnic background
- explore voluntary projects and support others to work positively with you and make a positive contribution
- help with the development of independence skills through practical and emotional support

Achieving economic well being

We promise to:

- open bank accounts and explain the importance of saving
- involve you in the family chores around the house to teach you independence skills
- help you draw up a budget each month so you do not have debts

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Report No.
CS14044

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services PDS Committee

Date: 26th June 2014

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

Title: HOUSING SERVICES 2014 -15 PRIORITIES

Contact Officer: Sara Bowrey, Assistant Director Housing Needs; Tel: 020 8313 4013 E-Mail: sara.bowrey@bromley.gov.uk

Chief Officer: Terry Parkin, Executive Director Education and Care Services; Tel: 020 8313 4060
E-mail: terry.parkin@bromley.gov.uk

Ward: All Wards

1. Reason for report

This report provides a summary of the key performance outturn for 2013/14. It then goes on to provide an update of the current housing pressures faced in relation to rising housing need and temporary accommodation use and the key priorities for 2014/15.

2. RECOMMENDATION(S)

2.1 Members of the Care Services Policy Development and Scrutiny Committee are asked to:

- a) Note the performance against the key priorities in the 2013/14 Portfolio and work plans for these service areas;
- b) Note the priorities as set out in paragraph 3.4 for 2014/15 in response to the current housing pressures being experienced as detailed in the body of this report.

Corporate Policy

1. Policy Status: Existing Policy: Further Details
 2. BBB Priority: Children and Young People Excellent Council Quality Environment Safer Bromley Supporting Independence Not Applicable: Further Details
-

Financial

1. Cost of proposal: Not Applicable: Further Details
 2. Ongoing costs: Not Applicable: Further Details
 3. Budget head/performance centre: This report covers the work of the operation housing needs and strategic housing services
 4. Total current budget for this head: £3,714,740 approved controllable budget for Operational Housing. Strategic Housing £14,240 credit
 5. Source of funding: Education & Care Services approved 2013/14 Revenue Budget (supporting people, homelessness DCLG grant, welfare reform grant and £1m contingency for homelessness and temporary accommodation pressures); Affordable Housing Payment in Lieu Budget as of 31.5.14 £3.361million unallocated
-

Staff

1. Number of staff (current): 57.33FTE (Housing Needs); 2FTE (Strategic Housing)
 2. If from existing staff resources, number of staff hours: The report covers the work of the above services, including all staffing resources. No additional staffing resources are required in relation to the content of this report.
-

Legal

1. Legal Requirement: Statutory Requirement: The housing needs service is responsible for discharging the council's statutory duties in relation to housing advice, homelessness and housing allocations. The work of the strategic housing service supports the delivery of these statutory functions through the provision of new affordable housing
 2. Call-in: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): There are around 10,000 approaches across the housing needs annually regarding housing related difficulties. Of these around 6,000 households present with imminent homelessness which requires in-depth casework intervention to assist in resolving homelessness. Around 430 new applications are received each month to join the housing register. There are approximately 850 households placed in temporary accommodation to whom the Council has a statutory rehousing duty under the homeless legislation.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

3.1 Summary of 2013-14 Performance:

The key priorities for 2013/4 were designed to fulfil both the Council's statutory duties and key targets in respect of housing, whilst ensuring that these were tailored to address local specific needs and priorities within Bromley.

Progress against the specific 2013/4 housing performance targets are detailed in Appendices 1 and 2 of this report.

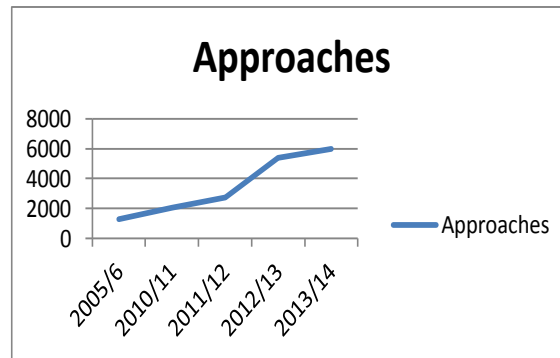
Overall Appendices 1 and 2 demonstrate that significant work has been undertaken to progress all priority areas, particularly in relation to the level of homelessness prevention work. However, the continuing high volume of statutory homelessness and emerging impact of the latest tranche of welfare reform, together with the shortage of affordable accommodation supply and rising costs of accommodation, have impacted significantly on the number of households accommodated in temporary accommodation exacerbating budgetary pressures.

3.2 Key achievements of note for 2013/4 are:

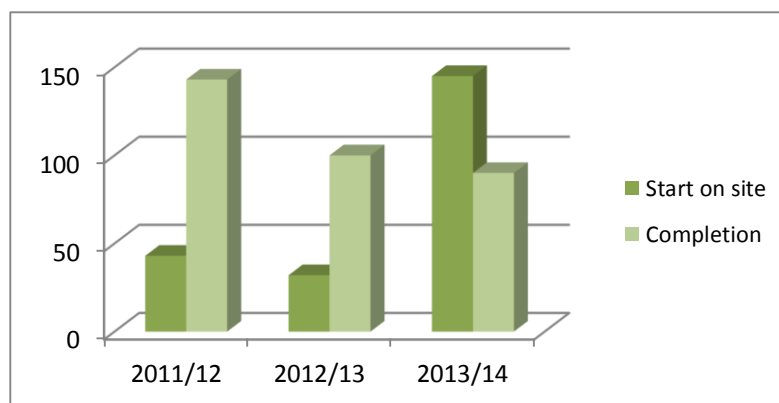
- Homelessness directly resolved through either in-depth homelessness prevention casework assistance or access to alternative private sector housing solutions for more than 2,000 households. The comparative cost of homeless acceptances and temporary placements for these households would equate to up to an additional full year budget pressure of £8.2million based on current average temporary accommodation costs.
- Enhanced incentives have assisted in accessing an additional 132 units of long term temporary accommodation directly diverting statutory homeless households from costly nightly paid temporary accommodation. This includes the refurbishment of the Bellegrove site to provide additional good quality cost effective temporary accommodation units.
- Piloting property a nightly paid block booking arrangement for 15 units achieving an annual saving of £29,000 against current average nightly paid costs.
- 38 social housing tenancies recovered through the social housing fraud initiative to enable use for newly emerging housing need.
- Joint working arrangements developed to advise and support households affected by the latest tranche of welfare reform assisting more than 200 households to resolve the potential shortfall in benefits resulting from the new benefit cap and bedroom size criteria.
- 151 new build affordable housing units were completed assisting the Council to meet statutory housing and social care duties.
- Five 2 bed properties were acquired using housing capital funds in order to assist the Council in meeting its statutory housing and homelessness duties.

3.3 Overview of current statutory housing need and supply

3.3.1 The volume of households approaching 'faced with homelessness' has risen dramatically during recent years, predominantly in response to complex economic factors and the ensuing impact on housing markets. The Table below shows the continued increase in approaches.



- 3.3.2 The highest area of increase has been from households facing eviction from the private rented sector which has increased year on year since the implementation of the first tranche of welfare reform changes and now accounts for more than a third of all homeless acceptances.
- 3.3.3 Simultaneously, the supply of suitable, affordable accommodation of all tenures available to enable the Council to meet its statutory housing duties has reduced
- 3.3.4 In terms of new affordable housing supply, with the average construction time for a new build development being approximately 18 months, the falling number of new-build affordable units starting on site during 2011/12 and 2012/13 is now translating into a reduction in affordable completions available to let. The table below provides details of new general needs affordable rent supply during 2013-14



- 3.3.5 In summary, this means that, despite the significant work undertaken by officers to prevent homelessness and find alternative housing options, diverting around 90% of initial approaches, the number of statutory homeless households having to be accommodated in temporary accommodation has continued to rise, increasing from 427 April 2011 to 824 in April 2014.
- 3.3.6 The growing reliance upon temporary accommodation to meet increasing demand until permanent housing solutions become available is reflected across London as a whole. The cost of securing accommodation to meet the council's statutory duties has risen dramatically against the benefit subsidies that can be claimed resulting in approximately a 2000% increase in costs since 2010. This is due to a combination of factors including the level of increased demand for temporary and private rented accommodation across the region, high and rising rental prices - increasingly in excess of the now reduced housing benefit local housing allowance levels payable and reduced supply of affordable housing nominations through re-lets and the number of new build units. These factors have resulted in an increased budgetary pressure for temporary accommodation, moving from a largely cost neutral temporary accommodation (TA) budget position to one where the majority of TA placements can now only be secured on a nightly paid basis (NPA) at a net cost to the council.

- 3.3.7 Considerable work has been undertaken during the past year to acquire alternative forms of more cost effective accommodation through invest to save enhanced incentive schemes to directly mitigate some of this pressure. This work assisted in securing 132 new temporary accommodation units as a direct alternative to costly nightly paid accommodation and directing 614 households to private rented sector accommodation thus avoiding the need for temporary accommodation placements.
- 3.3.8 The report to this Committee and the Executive in October 2013 provided detailed profiling of the current and projected pressures through to 2016/17. This profiling showed an in year pressure of £1.1m (full year effect £1.6m), with potential additional pressures rising to £3.7m by 2016/7. The report further detailed a series of actions being undertaken by the housing needs and strategic housing services designed to contain, and where possible reduce pressures through continued homeless prevention and initiatives to increase access to more cost effective housing options. Alongside these initiatives approval was given for additional contingency sums to be set aside in relation to the pressures which are unlikely to be able to be mitigated given the current relationship between housing need and housing supply market conditions.
- 3.3.9 The report further set out the current volatility of the situation and difficulty in profiling with any certainty into the longer term particularly in light of the current housing market, the cumulative impact of welfare reform, uncertainty over future development of new build schemes, the impact of affordable rents regime and the forthcoming changes in relation to universal credit.
- 3.3.10 In summary, the volume of statutory housing need against overall lack of available affordable housing supply within the borough means that, despite the volume of homelessness prevention work being undertaken, the Council is having to place the majority of those accepted as statutorily homeless into high cost temporary accommodation for considerable periods of time until a permanent housing solution can be identified. Budget and service pressures are severe and this is only likely to increase further over the next few years particularly in light of the reduced level of new developments, impact of welfare reform and escalating property and rental prices.

3.4 **Identified Key Priorities for 2014/15**

- 3.4.1 The detailed local approach to addressing the homelessness and housing supply issues detailed above are set out within the Council's Homelessness Strategy 2012-17 and is supported through the Portfolio Plan and forthcoming 2014-17 Housing Framework which will be made available for public consultation shortly.
- 3.4.2 There is no single solution to the issues set out above and, as such, the priorities for 2014/15 cover a range of initiatives designed to address the level of statutory homelessness and mitigate the associated budgetary pressures as far as possible. Set out below are the key priority actions for 2014/15:

Homelessness Prevention: Preventing as many households as possible from becoming homeless through robust and timely housing advice fully utilising the range of prevention tools and grants available. The priority areas being:

- Focusing on the main areas of homelessness increases: Proactive intervention to reduce the level of homelessness occurring from the private rented sector and enhancing the role of debt advice.

- Focused work with those affected by the benefit cap to prevent homelessness or assist to secure alternative housing.
- Working with housing associations to ensure adherence to the sub-regional protocol to reduce the level of potential homelessness arising from the latest tranche of welfare reform and increasing the number of households entering employment.

Maximising access to the private rented sector: To work closely with landlords and agents to access private rented accommodation both inside and outside of the borough to assist in discharging our statutory homelessness rehousing duties where appropriate.:

- Publicity campaign and landlords event to increase access to private sector accommodation
- Working at both a local and regional level to expand the areas in which private rented sector accommodation can be accessed to offer a greater range of more affordable private rented accommodation to meet statutory housing need.
- Continued review and promotion of enhanced incentives to attract new landlords

Increasing cost effective housing supply: explore and implement a range of options that deliver a range of good quality temporary and permanent accommodation to meet our statutory rehousing duties and reduce the current reliance on costly nightly paid accommodation, for example by:

- Continued promotion of enhanced incentives to increase the acquisition of cost effective leasing scheme units through our partner providers..
- Exploring the feasibility of using surplus Council properties for affordable housing and temporary accommodation purposes.
- Using payment in lieu funds to secure additional properties for affordable purposes
- Working at a sub-regional and pan London level to jointly seek to tackle rising nightly paid rates and to seek to promote more cost effective block booking solutions.
- Working with housing association partners to secure external capital funding from Government agencies for the delivery of new developments that best reflect local housing requirements
- Providing gap-funding to housing associations to enable the delivery of new affordable housing and the retention of existing affordable supply that they may be seeking to dispose of
- Ensuring that the Council's local planning policies are formulated and implemented to maximise affordable housing provision in line with policy requirements and reflect the tenure and size of affordable housing sought to meet statutory duties.

Making Best Use of the existing housing association stock: working with housing associations to ensure that the most efficient use of the existing stock is achieved to best meet statutory housing need by:

- Encouraging underoccupiers to move to smaller accommodation
- Promoting mutual exchanges and fixed term tenancies,

- Tackling any potential housing fraud by making full use of new legislative powers and social housing fraud grant funding available to housing associations
- Developing a joint housing protocol with local housing providers setting out common goals and agreed minimum standards in relation to matters such as stock management & maintenance, tenancy sustainment, property disposals and rental conversions, a commitment to the objectives within the Council's tenancy Strategy and the forthcoming Housing Framework and other local policies such as the common allocations scheme.
- Implementing joint protocols and agreed standards to minimise the potential rise in homelessness resulting from the implementation of welfare reform measures relating the benefit cap and bedroom size criteria.

3.4.3 The range of initiatives will offer a flexible targeted approach to tackling homelessness. In all cases resources will be prioritised against those initiatives, which offer the greatest cost efficiency in terms of reducing the cost of nightly paid accommodation and fulfilling the Council's statutory rehousing duties. Overall it is estimated that these range of initiatives will increase access to more than 100 additional units of accommodation during 2013/4, in the main temporary and private rented sector accommodation. However it must be noted that, given the current level of housing need and situation in the housing market it is not possible to fully mitigate the current pressures. As such the initiatives are largely aimed at containing the situation and preventing further cost pressures arising.

4. POLICY IMPLICATIONS

- 4.1 Housing objectives are set out within the relevant Departmental Portfolio and business plans
- 4.2 The objectives are compliant with the statutory framework within which the Council's housing function must operate and incorporates both national targets and priorities identified from the findings of reviews, audits and stakeholder consultation.
- 4.3 The objectives also assist in achieving targets set out within Building a Better Bromley, objectives set out within the forthcoming 2014-17 Housing Framework, Homelessness Strategy and draft Tenancy Strategy.

5. FINANCIAL IMPLICATIONS

- 5.1 The majority of the homeless prevention, social housing fraud and housing options work is DCLG grant funded. In 2013/14 a small additional grant was provided to assist in implementing the latest welfare reform changes. Whilst the homelessness grant funding has largely been secured until April 2015, the longer term future of grant funding is still unclear and, along with the changes to welfare benefits, will require close scrutiny in forthcoming years particularly given the current economic uncertainty and likely increases in homelessness and associated costs. This will be reported to the Portfolio Holder as and when the need arises.
- 5.2 The level of budget pressure in relation to the increased pressure on temporary accommodation has previously been reported showing estimated pressures of £1.2m in 2014/15 rising to £4.8m in 2017/18. £1.2m is being held in contingency in 2014/15 and can be drawn down with the approval of the Executive. The above initiatives are being undertaken to directly seek to minimise the level of pressure and to monitor the potential future cost pressures from both temporary accommodation and welfare reform
- 5.3 The Council will utilise capital funds to support the delivery of priorities detailed within this report. As of 31st May 2014, available capital funds are as follows:

	£
(1) Payment in Lieu Fund	
Allocated	£1.11m
Unallocated	£3.36m
TOTAL	£4.47m

6. LEGAL IMPLICATIONS

- 6.1 The Council has a number of statutory obligations in relation to housing. These include the provision of housing advice and assistance to prevent homelessness or divert from homelessness; assessment of homeless applications; to make temporary and permanent housing provision for those applicants to whom the Council has a statutory rehousing duty; supporting such households to sustain accommodation; to have a published Allocations Scheme, a Housing and Homelessness Strategy and a Tenancy Strategy.
- 6.2 Additionally, Housing Needs are a material planning objective. The National Planning Policy Framework 2011 states that, where there is a demonstrable lack of housing to meet local needs, planning authorities should include policies seeking provision of affordable housing on suitable sites. Saved policies H2 and H3 within the Council's adopted Unitary Development Plan address this requirement.
- 6.3 Where housing can not be delivered on site then Payment in Lieu contributions from developers provide funds to enable the Council secure affordable housing elsewhere in the Borough. The obligation for PIL is set out in agreements made under the provisions of section 106 Town and County Planning Act 1990 which may include restrictions on when and how we can spend the PIL shall be spent. In line with the Town and Country Planning Act 1990, the Council has a legal obligation to spend PIL funds on delivering affordable housing.

Non-Applicable Sections:	Personnel
Background Documents: (Access via Contact Officer)	<p>LB Bromley Homelessness Strategy 2012 – 2017 LB Bromley Tenancy Strategy 2013 LB Bromley Unitary Development Plan 2006 LB Bromley Affordable Housing Supplementary Planning Document 2008</p> <p>Renewal & Recreation Portfolio 2013-14 Business Plan EC&HS Department 2013-14 Portfolio Plan Allocation of Affordable Housing PIL Funds – Care Services Committee, 4th September 2012 Payment in Lieu: Framework and Allocation Process (6th February 2013, Executive Committee) Affordable Housing PIL Fund: Capital Funding Bid- 13th March 2013, Executive Committee Residential Property Acquisitions: Capital Funding Proposal- 24th July 2013, Executive Committee Addressing Rising Homelessness and Housing Need and Associated Budgetary Pressures (ACS11053) EC&HS PDS and Executive report October 2013 – Homelessness pressures and contingency draw down.</p>

Appendix 1: Housing Needs Summary of key performance 2013/14

Status Indicator:

✓ Action on target. ➤ Commenced & on target to achieve ✖ Action not yet commenced/ not achieved within year.

↑ Above target; ↓ Below target: → On target

1. Housing Options & Homeless Prevention		
What we are doing?	Status	Commentary
Provision of a sufficient supply of cost effective, good quality temporary accommodation and seek to minimise the use of temporary accommodation, & in particular costly nightly paid accommodation. Aim to sustain the original 50% TA reduction.	✖ Red	Due to the dramatic increase in homelessness approaches and difficulty in accessing a sufficient supply of affordable accommodation, nightly paid accommodation (& the associated cost) has risen significantly. A detailed action plan is in place aiming to mitigate these pressures wherever possible. Prevention and housing options work during 2013/14 assisted to mitigate the potential costs pressures by in excess of £8million.
Increase the number of people assisted through homeless prevention and option schemes by providing practical support to applicants to assist them in remaining in their own home or access private rented accommodation or otherwise resolve their housing need.	✓ Green	The focus on homelessness prevention and securing alternative housing solutions to relieve homelessness is thoroughly embedded within the service with the use of comprehensive prevention and options toolkit to enable tailored advice and assistance to be provided to maximise early intervention work, This includes specialist debt and money advice, prevention of repossession, benefits and welfare work and so on. This work means that around 90% of those approaching with housing related difficulties are diverted from homelessness.
Implement mortgage & rent arrears prevention schemes action plan. Continue to promote & deliver the range of initiatives offered to assist customers facing mortgage or rent arrears difficulties including; full take up of the money advice service, promotion of MRS schemes and possession prevention funds.	✓ Green	This continues to be a key priority for the service. There has been full take-up of the debt/money advice and welfare reform surgeries offering approximately 344 appointments and related housing advice work which has directly prevented mortgage or rent arrears repossession including those affected by the latest tranche of welfare reform. However it must be noted that national funding for the mortgage rescue scheme has now ceased..
Continue to work in partnership with private rented sector (PRS). Landlords to assist households to remain in or access privately rented accommodation.	➤ Amber	Like all boroughs we continue to face difficulties in accessing a sufficient supply of private rented sector accommodation, with the difficulties mainly centred on increasing rental prices exceeding LHA levels and concerns over the future welfare reforms. However ongoing work to encourage private landlords to work with LBB includes the introduction of enhanced incentives, a dedicated property negotiator and dedicated tenancy support. This work has increased the level of prs and leasing scheme acquisition acquiring 132 additional leased units, 91 private sector units and directing more than 600 households into the private rented sector.
Maintain the level of home visiting to improve the robustness of the housing assessment and to assist the aim of reducing homeless presentations and make the best use of properties/options.	✓ Green	Home visiting is a well established as part of initial housing options & homeless prevention/assessment processes. In addition ongoing visiting takes place for households residing in temporary accommodation to continue to monitor their circumstances and consider all potential housing options available to them. In addition visiting has now commenced to work with those vulnerable households most affected by the recent LHA changes and likely to be affected by the benefit cap.

Key Performance Indicators:	2009/10 Actual	2010/11 Actual	2011/12 Actual	2012/3 Actual	2013/4 Actual	Status	Target 14/15
Total Number of households living in temporary accommodation (TA).	477	427	612	764	824	↓ Red	Target removed to focus on accommodation type and cost effectiveness average net nightly rate £46.92

Key Performance Indicators:	2009/10 Actual	2010/11 Actual	2011/12 Actual	2012/3 Actual	2013/4 Actual	Status	Target 14/15
Of which in self-contained nightly paid accommodation:	69	121	258	284	420	↓ Red	400
Of which shared facility accommodation	25	31	49	49	36	→ Green	Reduce to less than 40
16/17 year olds in shared NPA for more than 6 weeks	0	0	1	0	0	→ Green	0
Total number of families in shared accommodation for more than 6 weeks	0	0	4	1	2	↓ Amber	0
Homeless households approaching Council housing advice service(s) for whom housing advice casework intervention resolved their situation.	1,290	2,112	2119	2,137 (80%)	2,007 (79%)	↑ Green	More than 2,000 70%
Number of households assisted to access the private rented sector.	262	267 (incentive schemes) 288 (introductions & advice)	216 (incentive schemes) 276 (introductions & Advice)	124 incentives, 538 introductions & advice)	247 614 directed directly to prs without incentive required	→ Green	300
New acquisitions of temporary accommodation				78	132	↑ Green	At least 75 additional units at TA subsidy level.
Number of homeless acceptances	414	426	634	566	503	↑ Green	Less than 600
Proportion of households accepted as homeless who were previously	0.97%	0.88%	0.69			→ Green	Less than 2%

Key Performance Indicators:	2009/10 Actual	2010/11 Actual	2011/12 Actual	2012/3 Actual	2013/4 Actual	Status	Target 14/15
accepted as homeless. .				1.2%	2.7%		
Social housing Fraud				25 properties recovered	38properties recovered	↑ Green	50 properties to be recovered during the grant funding period up to April 2015.

2. Maximising Supply and Making Best Use of All Available Accommodation.

What we are doing?	Status	Commentary
Fully embed the new allocations scheme and complete the re-registration process	✓ Green	The scheme is fully embedded with minor reviews planned for 2014/5 to ensure that the scheme remains updated against guidance and legislative updates. The current scheme continues to include about 29% of those households applying to register 4,622 new applications were received during 2013/14. The total number of households now included on the housing register is 3,052 rising from 3,374 in April 2013.
Ensure accurate and timely housing register assessments, ensuring a backlog does not occur in the lead up to the implementation of autobanding and that the migration process and any closely is effectively managed.	✓ Green	Turnaround for initial assessment now stands at less than 7 days, with the average overall assessment time for more complex cases requiring additional information/ assessment now running at about 4 weeks, dependent upon timescales for receipt of third party information.
Working closely with housing associations to make best use of stock including addressing Underoccupation	✓ Green	We continue to work closely with housing associations to identify all cases and work through our options toolkit. Work is also being undertaken to identify and contact those social housing tenants affected by the underoccupation benefit changed – this work has assisted around 80 households to move to smaller accommodation in 2013/4. A sub-regional protocol around welfare reform has been developed agreeing a set minimum standards of the support housing associations give to their residents affected by the changes.
To produce and publish the newly required tenancy strategy aimed at guiding registered providers with relation to tenancy and lettings to make best use of stock	✓ Green	The strategy was published in January 2013.

Social housing lettings to LBB nominations:

WAITING LIST CATEGORY	SHELTERED			GENERAL NEEDS					2013/14 LETTINGS	AVERAGE NO OF MONTHS	
	BEDSIT	1 BED	2 BED	BEDSIT	1 BED	2 BED	3 BED	4 BED			5 BED
HOMELESS - EMERGENCY						2	4	1		7	10.53
HOMELESS - PREVENTION		2		2	4	10	5	1		24	9.21
HOMELESS - ACCEPTED	2	1		4	45	109	68	9		238	12.6
HOMELESS - INTENTIONALLY & NOT IN PRIORITY	1	2		4	26	1				34	5.64
HOMELESS - ROUGH SLEEPER	1									1	0.79
S&R MOVE-ON				4	25	2				31	9.19
LEAVING CARE				1	11	2				14	14.93
BAND H GENERAL										0	
BAND R GENERAL	10	11	1	4	22	16	32	7	1	104	7.59
AFFINITY SUTTON CLIENTS	2	4		4	28	29	26	6		99	9.01
TOTAL	16	20	1	23	161	171	135	24	1	552	10.26

Breakdown of Current Housing Register:

WAITING LIST CATEGORY	SHELTERED BEDSIZE REQUIREMENTS				GENERAL NEEDS BEDSIZE REQUIREMENTS						TOTAL
	BEDSIT	1 BED	2 BED	3 BED	BEDSIT	1 BED	2 BED	3 BED	4 BED	5 BED+	
HOMELESS - EMERGENCY					1		1	1			3
HOMELESS - PREVENTION	3	1			5		2	1			12
HOMELESS - ACCEPTED	27	5	2	1	128	6	726	144	33	8	1080
HOMELESS - INTENTIONALLY & NOT IN PRIORITY	9				76	1	6	5			97
HOMELESS - ROUGH SLEEPER	1										1
S&R MOVE-ON	3				77	1	3				84
LEARNING DISABILITY	1				5		1				7
LEAVING CARE					136	1	5				142
BAND H GENERAL					18	2	11	2	1		34
BAND R GENERAL	178	22			44	16	433	225	35	6	959
AFFINITY SUTTON CLIENTS	100	24	1		64	10	165	201	61	7	633
TOTAL	322	52	3	1	554	37	1353	579	130	21	3052

Strategic Housing

Renewal and Recreation Portfolio Plan 2013-14: Summary of achievements against objectives

Aim 4a:	Produce a Housing Strategy setting out the Council's housing objectives over the next 5 years
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Action	Milestone(s)	RAG Status
Produce and maintain the new London Borough of Bromley Housing Strategy.	<p>Initial Member group meeting held in July to consider type and content of forthcoming Housing Strategy. Draft Housing Strategy formulated by Strategic Housing in consultation with a corporate officer team. A further Member group meeting was undertaken in October to consider proposed draft Strategy in detail.</p> <p>The final draft Housing Framework and action plan was circulated to all Members for comment in January 2014. The draft documents are due to be published for public consultation, following clarification of matters arising from the Member consultation period.</p>	

Aim 4b	Encourage the supply of good quality affordable housing that best meets local, statutory and priority housing needs
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Action	Progress update on status of delivery	RAG Status
Allocate housing capital funds	During 2013-14, the Executive granted approval for the allocation of £1.12million to enable the acquisition (and associated costs) of residential properties to assist the Council in meeting its statutory housing duties. A corporate Property Acquisitions Project Group has been established to drive delivery. This sum has now been fully allocated enabling the acquisition of 5 properties to assist the Council in meeting its statutory housing and homelessness duties.	
Work with the Council's Housing development	A series of meetings with the senior management teams of each Registered	

Strategic Housing

Renewal and Recreation Portfolio Plan 2013-14: Summary of achievements against objectives

<p>partners to deliver the Council's strategic housing objectives.</p>	<p>Provider with significant stock/ development programme within the Borough took place in order to discuss shared commitments to the provision of housing within Bromley. Particular items of consideration included intermediate housing, temporary accommodation, lettings and stock management, and future development and investment. Follow up actions are currently being progressed by Strategic Housing, including the creation of a joint-protocol between the Council and each Registered Provider. A draft Joint Protocol has been drafted and this will be negotiated and implemented during 2014-15.</p>	
<p>Work closely with the Housing Needs Division to ensure that new affordable housing supply reflects local strategic housing objectives.</p>	<p>Options for temporarily converting various Council-owned buildings to assist the Council in meeting its statutory housing duties are being appraised alongside other options for use.</p> <p>235 new build affordable housing properties started on site in 2013/14, of which 107 were for affordable rent, 38 temporary accommodation units and 90 for shared ownership.</p> <p>151 affordable housing units completed in 2013/14, of which 95 were for affordable rent and 56 for shared ownership.</p>	
<p>Pursue affordable housing funding opportunities available from central government, the Homes and Communities Agency and the Greater London Authority</p>	<p>GLA and Registered Provider (RP) partners are aware of the Council's internal consultation process on all new sites requiring public investment.</p> <p>Internal consultation has taken place on a number of schemes where the RP has sought GLA investment and/ or inclusion within the GLA Housing programme.</p>	
<p>Seek to secure alternative forms of accommodation to reduce the reliance on nightly paid accommodation.</p>	<p>Ongoing strategic work with Registered Providers to minimise affordable stock disposals. A meeting held with a Registered Provider at the end of September to discuss their proposed asset management/ investment strategy. Further negotiations underway with a Registered Provider regarding proposed RP asset management & investment strategy and options regarding stock disposal/ reinvestment. This is continuing into 2014/15.</p>	

Strategic Housing

Renewal and Recreation Portfolio Plan 2013-14: Summary of achievements against objectives

Implement new Trading Account arrangements and continue to pursue new opportunities to maximise income	The Trading Account arrangements are now being implemented as agreed. Following arising in-year vacancies, 2 further posts have been deleted in order to cover team costs. Team achieved a balanced budget in 2013/14 generating surplus of c.£14k for the Council..	
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Report No.
CS14055

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Care Services PDS Committee

Date: 26th June 2014

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

Title: **REPORT ON CONSULTATION ON SHORT BREAKS FOR
DISABLED CHILDREN & YOUNG PEOPLE**

Contact Officer: Hilary Rogers, Service Manager (Joint Commissioning),
Commissioning & Partnerships
Tel: 020 8464 3333 x 3069 e-mail: hilary.rogers@bromley.gov.uk

Chief Officer: Executive Director of Education, Care & Health Services

Ward: (All Wards);

1. REASON FOR REPORT

- 1.1 In September 2013 Members approved a three month consultation with parents/carers and disabled children & young people on the future commissioning of Short Breaks for disabled children & young people.
 - 1.2 This report details the responses to the consultation which will inform the Council's Short Breaks Commissioning Strategy for the future.
-

2. RECOMMENDATION(S)

- 2.1 Care Services PDS Members are asked to note and comment on the detailed response from the Short Breaks consultation.

Corporate Policy

1. Policy Status : Existing Policy : Draft Care Services Portfolio Plan for 2014/15
 2. BBB Priority: Children and Young People – achieve their full potential, ensuring the health and well-being of children and young people and their families, promoting independence:
-

Financial

1. Cost of proposal:: Contained within current resources of £2,432,400
 2. Ongoing costs: :
 3. Budget head/performance centre: Children’s Disability Services, Social Care
 4. Total current budget for this head: £2,432,400
 5. Source of funding: Revenue Support Grant
-

Staff

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

Legal

1. Legal Requirement: Statutory Requirement: Children Act 1989 requiring local authorities to provide services designed to give breaks for carers of disabled children. Regulations relating to this duty enforced April 2011 (Short Breaks Duty)
 2. Call-in: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 400 disabled children & young people
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments:

3. COMMENTARY

3.1. Background

- 3.1.1 The Children's Act 1989 requires local authorities to provide services designed to give breaks for carers of disabled children. Regulations relating to this duty were brought into force in 2011 requiring each local authority to offer a relevant range of Short break services.
- 3.1.2 Short Breaks provide opportunities for disabled children to have enjoyable experiences away from their primary carers, thus contributing to their social inclusion and personal and social development. They also provide the parents of disabled children with a necessary and valuable break from their caring responsibilities.
- 3.1.3 However, the number of disabled children and young people is increasing both nationally and locally and the needs of these children are becoming increasingly complex. This is happening at a time of increasing budget pressures which require resources to be used as effectively as possible.
- 3.1.4 In September 2013 Members approved a three month consultation with parents/carers and disabled children & young people seeking their comment upon the range and choice of Short Breaks offered by LB Bromley.
- 3.1.5 The outcome of this consultation is intended to reflect service users views within a long term Short Breaks Commissioning Strategy..

3.2 Consultation Process

- 3.2.1 In early 2013, officers carried out a review of Short Break services and produced a range of information including numbers of disabled children by age, disability, assessed levels of need and type of services currently used. This review formed the basis for the consultation.
- 3.2.2 The essential information sought from the consultation was in respect of :-
- Overnight short breaks : either in a residential home, foster carers homes, or parents making their own arrangements for overnight care
 - Group based short breaks : preferred times and days when this should be available,
 - One to one short break care, e.g. childminding : developing service into evening sitting, using providers outside of Bromley
 - Direct Payments: support provided to facilitate ease of use, availability of suitable Short Break provision to purchase, clarity of eligible services for direct payment spend
 - Access to universal provision for Short Breaks
 - Obvious gaps in Short Break provision
- 3.2.3 Parents were advised of the consultation through Bromley's website, and through the MYLIFE site, communications were sent out by voluntary sector partners (Bromley Mencap, Burgess Autistic Trust), and flyers sent via special schools and via Bromley Parent Voice. Social Workers from the Disabled Children's Team also provided information on family visits and the team's Specialist Information Officer informed all relevant contacts.
- 3.2.4 Parents were invited to express their opinions in a number of ways:-
- On line, via 'Bromley Mylife'
 - Through face to face meetings with Council officers
 - Through face to face meetings facilitated by Bromley Parent Voice.
- 3.2.5 Bromley Young Advisors had worked throughout 2013 to obtain views from disabled children and young people and represented these views in workshop presentations.

- 3.2.6 Three key documents were made available for respondents:
- A summary of the purpose of the consultation – detailing Bromley’s vision statement for short breaks and advertising details of group consultation meetings,
 - A short ‘key facts’ document, providing a précis of current Short Break services
 - A review information booklet, providing detail of the review information

3.3 Data on Consultation Responses

3.3.1 On line questionnaire

A total of 39 responses were received, of which 13 replied that their child does not receive a Short Break.

Appendix One shows the main findings. The most numerous responses were in respect of direct payments and offered good user perspective into the Council’s policies and procedures.

3.3.2 Face to face meetings with Council officers

A total of 8 meetings were held, borough wide and at different times of the day and evening. There were 30 attendees in total, representing parents and carers.

Appendix Two shows the main findings, with comment on group based provision being the main topic for response.

3.3.3 Face to face meeting facilitated by Bromley Parent Voice

Two meetings were facilitated by Bromley Parent Voice, (BPV) , with a total of 49 parents attending. BPV reported that parents would prefer to discuss their issues with other parents and expressed that the Council is not good at listening to their (the parents’) views.

Appendix Three shows the main feedback from these meetings

- 3.3.4 Council officers subsequently met with BPV representatives to discuss the consultation feedback. This proved a good vehicle for Council policy and decision making rationale to be discussed and for improved lines of communication to be agreed, particularly when key decisions are being considered.

3.4 Summary of Consultation Responses

- 3.4.1 Overall parents/carers and disabled children & young people requested a better range of services be made available which would increase choice to suit individual need which would contribute to improved life outcomes.

- 3.4.2 It has been possible for a number of operational issues which were raised from the consultations to be addressed immediately. This has been valuable in ensuring that parents/carers are having their needs better met and also in terms of gaining parental confidence that the Council is listening to their concerns and demonstrating that changes can be made in response to this.

- 3.4.3 An overall summary of the consultation responses concludes the following:-

- Parents are very satisfied with the service delivery at Hollybank, the Council’s residential overnight provision but better use needs to be made of the highly skilled staff resource.
- Parents value group based weekend and holiday provision and prefer for the Council to continue to commission this service
- Parents would like a greater choice of services that can provide breaks within the child’s own home, particularly an evening sitting service

- Direct Payments : whilst they offer greater flexibility, the process is confusing and time consuming which often negates the purpose of parents having a break from their caring responsibilities.
- Direct Payments: the market needs to be developed by the Council's Commissioners in order for real choice to be available
- Dissemination of information must be improved

3.5 Council Response to Consultation Outcomes

3.5.1 In response to items detailed in 3.4 above, Council officers have undertaken the following:-

- Commenced a further review of Hollybank, proposing a new service model which will utilise the resource more efficiently. This will be separately reported to PDS in September 2014.
- Commissioned additional group based short break provision which commenced in May 2014, specifically to provide for children & young people with challenging behaviour and those with complex needs. Parents were included in the evaluation panels for these services
- A Personal Assistant (PA) Register has been commissioned by the Council which should increase the supply of good quality and competent support workers to assist disabled children & young people to safely access community facilities
- Seeking permission to commission a greater range of services including befriending and evening sitting services which parents could use their direct payments to purchase. This is separately reported to June PDS in the paper entitled 'Commissioning of Short Break Services 2014/15'.
- Commissioned a cross borough framework agreement for domiciliary care, including 20 specialist agencies , which offers a robust choice in terms of support staff skills, knowledge and competencies.
- Increased efficiency in respect if direct payment processes, working with colleagues in Adult Social Care, LBB Finance and Internal Audit.
- Identified a resource to enable an Inclusion Officer to improve facilitation for access to universal services.
- A Disabled Children's Register has been created which will enable immediate dissemination of information to all those registered. In addition, the development of the Local Offer which requires the Council to publish details of services available within the borough and surrounding boroughs will further assist parents/carers with sourcing information
- A long term Commissioning Strategy is being developed which will support parents/carers into the future.
- A copy of the outcomes from the consultation will be added to the Council website and Bromley MyLife web portal.

3.6 Summary

- 3.6.1 Disabled children and their families are not a homogenous group. The population of disabled children represents a wide range of conditions, needs and personal circumstances. For many families the needs of their child may be complex and these families may require high levels of support including specialist services, possibly requiring one to one or two to one support, either in the home, at groups or residential locations. Conversely, some disabled children will require lower levels of service intervention and in some cases their needs can primarily be met through universal services, with some support provided to help them access that provision. This may be sufficient to maintain family stability and achieve good outcomes for the child.
- 3.6.2 In order to meet this wide spectrum of needs, local authorities are required to offer a diverse range of services, designed to meet local need. Some services may be low in cost whilst offering essential support or access whilst some services may be of high costs and of great value to those families with the greatest needs.
- 3.6.3 In future we will have to robustly assess the impact Short Breaks are having on families, ensuring enhanced life outcomes for children.

4. POLICY IMPLICATIONS

This outcome from this consultation will be in line with the Draft Care Services Portfolio Plan 2014/15 : ‘ to support children with complex disabilities to remain within the family home and their local community through the provision of a range of high quality short break services.’

5. FINANCIAL IMPLICATIONS

- 5.1 The current financial resource for Short Breaks is £2,432,400. The Short Breaks Commissioning Strategy which will be informed by this report will ensure that costs are contained within existing resources.

6. LEGAL IMPLICATIONS

- 6.1 The Children’s Act 1989 requires local authorities to provide services designed to give breaks for carers of disabled children and regulations relating to this duty were brought into force in 2011 requiring each local authority to produce an annual Short Breaks Statement and to offer a relevant range of short break services for disabled children and young people who have a disability that has a substantial and long term adverse effect on their ability to carry out normal day to day activities.
- 6.2 The Children and Families Act 2014 requires local authorities to publish a Local Offer of services and eligibility criteria relating to access to those services

Non-Applicable Sections:	Personnel Implications
Background Documents: (Access via Contact Officer)	The Breaks for Carers of Disabled Children Regulations 2011 http://www.legislation.gov.uk/ukxi/2011/707/made Children & Families Act 2014 http://www/legislation.gov.uk

Appendix One Summary of on line responses to Short Break Consultation

Total no. of responses = 39, including 13 not receiving Short Breaks (Not all respondents answered all questions)

36 respondents have one child with a disability, 3 respondents have 2 children with a disability

0 respondents children with a disability are aged 0 – 4

12 respondents children with a disability are aged 5 – 10

10 respondents children with a disability are aged 11 - 15

5 respondents children with a disability are aged 16 – 18

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
No. children accessing	7	11	5	12	1	
Comments	<p>All said they preferred these breaks within a residential children's home environment</p> <p>1 asked for an evening sitting service</p>	<p>7 said they are satisfied for the Council to make arrangements for their group based provision</p> <p>4 noted they might like to make their own arrangements</p>	<p>2 asked for evening childminding services</p> <p>3 asked for overnight childminding services</p> <p>1 asked for weekend childminding services. NB. <i>This service is already available</i></p>	<p>11 said there are not sufficient community services to purchase with direct payments</p>	<p>This parent feels that the Outreach support worker knows the needs of their child well and understands the outcomes desired for the child and knows about local community provision</p>	<p>13 parents said there are gaps in our Short break provision</p> <p>7 parents said there are no obvious gaps in Short Break provision</p>

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
	Hollybank was reported by most as the best venue for their child due to the skills of staff, complexity of child's needs and/or access to specialist equipment	4 are satisfied with the times/days that the group based provision runs 7 would like alternative times/days	3 said they would be willing to travel to an out of borough childminder 2 said they would not be willing to travel to an out of borough childminder	8 said they do not regard community services as being safe for their children 3 said they do regard community services as being safe for their children		
	Most parents are satisfied with the Council making arrangements for these overnight breaks, with 2 parents noting they might like to make their own arrangements	2 requested longer days during holiday periods to provide childcare for working parents		7 would like to be able to use direct payments for overnight breaks 3 would not wish to use direct payments for overnight breaks		
		One comment on Riverside's after school provision <i>NB. This is not funded by Short Breaks</i>		10 would like the Council to provide training for carers who receive direct payments 1 would not wish the Council to provide training for carers who receive direct payments		

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
				<p>8 would consider pooling their direct payments with others if it enabled more provision. One idea was to use this funding to provide sports teachers for small groups (swimming) or to pool for coach trips</p> <p>One parent would like the Council to facilitate this pooling</p> <p>4 would not consider pooling their direct payments with others</p>		
				<p>8 parents think we do not have the right support and monitoring processes,</p> <p>4 parents think the Council does have the right support & monitoring processes</p>		

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
				<p>8 parents would prefer for a third party to purchase services on their behalf with their direct payments</p> <p>4 parents would not want a third party to purchase services on their behalf with a direct payment</p>		
				<p>11 parents do not think that criteria relating to the use of Direct Payments is clear & informative</p> <p>1 parent thinks it is clear & informative</p>		

Summary of specific comments:-

- 4 specific comments about provision for 18 +
- Generally requests for more locally based provision
- Requests for local after school provision, sitting service, evening service
- Requests and comments about eligibility and fairness and transparency of decision making
- Clarity around use of and monitoring of direct payments
- Possible use of Marjorie McClure School for group based provision
- Consideration of provision for whole family

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Appendix Two Summary of face to face Short Break Consultation with Council Officers

Total no. of meetings – 8, borough wide

Total no. attendees – 30, plus 3 staff from Hollybank

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
Comments	Under use of Hollybank is a concern	Not always appropriate for individual children – more community activities should be considered		Not suitable due to lack of skilled workers, Needs market development		Lack of easily accessible up to date information. A calendar of forthcoming events/activities would be helpful.
	Hollybank expertise should be available for advice on managing behaviour, inc. how to cope within a home environment	Autism specific group based scheme is beneficial		Too bureaucratic		Lack of appropriate provision for 18+ group <i>NB. Short Breaks are for young people up to age 18</i>
	Parental choice of days would be preferable	Offer secure breaks with high parental confidence		Cannot always find provision for use of d.p.s, especially for those with complex needs		Looking for a service which promotes independence

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
		Request for activity specific schemes		Stressful to manage		Volunteers can be unreliable
		Request for schemes which enhance independence		Will not suit everybody		Parents want better support for access to community sports facilities
		Using school premises offers familiarity for some children		Do not suit anybody		Networking facility for info exchange would be useful.
		Using school premises is not beneficial for some children		Parents would like an analysis of users, and types of services sourced which could provide good information for those not currently using them		Support for siblings – scheme at Maypole was good for this
		Riverside being oversubscribed is testament to there being a need		Clarity required on Council policy on DBS checks inc. how often they should happen		Training required for universal providers
		Need to have a policy for use of spare capacity when there are 'no shows'		Parents want DP as they offer:- Flexibility Responsibility Accountability		Consider 'Chartermark' for universal services

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
		Greater use of Hawes Down should be explored as this is 'safe', particularly at weekends, using volunteers for support				Volunteer scheme for transport could enable better access
		Venues/locations are very important				Some universal providers 'exploit' need for specialist groups
						Sometimes need emergency breaks
						Support for parents to manage challenging behaviour would be beneficial

Summary of specific comments:-

- Across the board praise for Hollybank and Riverside, request for more provisions
- Generally requests for more locally based provision
- Request and comments about information, including information about surrounding boroughs provisions
- Clarity around use of and monitoring of direct payments
- Request for more diversity of provision, e.g. wheelchair users, those with health needs
- Request for more ASD specific provision, balanced with comment about too high a focus on ASD specific provision
- Possible use of Marjorie McClure School for group based provision
- Requests for provision that specifically addresses needs of teenage group, inc. physical activities
- Consideration of provision for whole family
- Requests for development of services which parents can pay to access
- Request for development of activities, especially swimming

Appendix Three Summary of group Short Break Consultation organised by Bromley Parent Voice

Total no. of meetings – 2, venues: Hawes Down Centre (day time) and Community House, Bromley (evening)

Total no. attendees – 49

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
Comments	Needs to work better for parents who wish to select their own times for taking short breaks, esp. weekends and holiday periods	Use of school premises – particularly resources available at Riverside. Concerns that Riverside School may not wish to continue to deliver group based provision - parents would like to be involved if this resource is withdrawn.	LBB should facilitate the development of a sitting service- even if they do not block buy places. Parents could pay for it themselves but need a service to be available to them	Need a better market for direct payments to be successful		Information. Use of Bromley MyLife does not suit parents' needs.
	Drop of and collection times not always convenient	Need a policy for 'clawback' of funding for under utilised group commissioned which the Council has commissioned		Need greater flexibility or clarity around flexibility as what they can/cannot be used for		Dissemination of information not good enough

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
	Skills of staff could be better utilised within other community settings or for individual parental support	Need a policy re non attendance at group based provision that LBB has commissioned		Need an analysis/profile of DP users to identify which groups of cyp use DPs successfully		Question as to whether LBB are listening to parents' concerns
	Spare capacity which is block commissioned. must be used efficiently to obtain value for money	Needs better communication with parents re. activities that cyp are involved in		Gap in advice around tax and NI implications		Car pooling – could LBB facilitate informal networks
	Governance arrangements should include parents	Programme of activities should be available on providers web sites and sent out to parents with dates		LA should provide/offer a resource for training of support workers		Sibling support is required
	More challenging cyp should have same opportunities as less challenging – might be achieved by better monitoring of outcomes for individuals	More venues needed – borough wide				Eligibility – transparency around assessment, thresholds etc. needs urgent work as there appears to be a high level of subjectivity

Provision Type	Overnight Short Breaks	Group based Short Breaks	One to one Short Break Care (Childminding)	Direct Payments	Community Outreach	Obvious gaps
						One off events can provide good, cost effective support for families

Other comments:-

- LBB and parents/carers should be working to develop a ‘trusting relationship’ – this should be added to Vision Statement to. Parents need to feel that they are being listened to
- There are a lack of Carers Assessments
- No obvious provision/account of those with EAL
- Thresholds for cyp with high functioning ASD sometimes precludes access to specialist services but access to universal services is difficult/fraught/ inappropriate
- Support for siblings – the borough does not recognise their needs
- Agenda is now 0 -25. These services are still directed at under 17 year olds. Work need to accelerate to accommodate the new agenda.
- Anxiety about reduced service provision if there is a wholesale move towards direct payments
- Market development – providing for SEN is a ‘niche’ market which may not attract the right level of development from providers
- A service which provides better family support, particularly for those at risk of breakdown would be beneficial for some families
- Better use of facilities (esp. schools) borough wide
- Need a policy for offer of short break when a child is in hospital

Other comments:

Access to leisure facilities, esp. swimming – could be organised at Riverside School or Marjorie McClure.
Support for 18 + - need to think about impact of Carers Bill

Appendix Four Summary of comments from disabled children & young people to Short Break Consultation

Copies of an easy ready document were made available to Hollybank attendees and attendees at the Riverside Christmas group based provision.

A small number of response were received as follows:-

Young person A - attends Hollybank which he likes but would not like to stay overnight with another family. He attends Riverside as he has exception transport. He would like to attend provision closer to home but this presents a problem as his mum cannot drive and he has 2 disabled siblings so cannot do all the activities he would like to. He would not feel safe to access community facilities just with friends.

Young person B - attends Hollybank which he thinks is ok but would not like to stay overnight with another family. He attends riverside group scheme which he likes and would also like to attend groups closer to home and after school. He likes scouts, swimming and cinema.

Young person C – Has overnight breaks with foster carers which he likes. He does not attend Riverside as the times do not fit with 'family fun time', Transport would also be a problem for him to use Riverside. He likes groups activities close to home, particularly scouts. He would like to go to the park and go shopping with friends.

Young person D - attends Hollybank which he likes but is not sure if he would like to stay overnight with another family. He attends Riverside which he likes very much and would also like to be able to go to group activities closer to home, although he doesn't know what would be available and would need support at all groups.

The Young Advisors told us that disabled children & young people :-

- like to meet up with friends outside of school,
- want access to all the same activities as are open to non-disabled children,
- think Hawes Down should be used to offer activities
- do not like it when 'jargon' is used
- want to feel safe
- recognise that different people need different types of space
- recognise that services need to be tailored to abilities
- would like a spread of activities in different parts of the borough
- want to do things that are exciting and enjoyable, either with or without support
- want to know what the Council does to ensure that staff who work directly with disabled children & young people are 'safe' people to be working in that capacity

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