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DATE: 9 January 2015

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, Hannah Gray, Terence Nathan, Charles Rideout and Melanie Stevens

Sarah Dowding, Young Advisers Maureen Falloon, Bromley Council on Ageing Joanna Frizelle, Bromley Experts by Experience Linda Gabriel, Healthwatch Bromley Tia Lovick, Living in Care Council Catherine Osborn, Carers Forum

A meeting of the Care Services Policy Development and Scrutiny Committee will be held at Bromley Civic Centre on <u>WEDNESDAY 21 JANUARY 2015 AT 7.00 PM</u>

MARK BOWEN Director of Corporate Services

Paper copies of this agenda will not be provided at the meeting. Copies can be printed off at <u>http://cds.bromley.gov.uk/</u>. 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

AGENDA

ART 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 4 working days before the date of the meeting. Therefore please ensure questions are received by the Democratic Services Team by <u>5pm on Thursday</u> <u>15th January 2015</u>.

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 4 working days before the date of the meeting. Therefore please ensure questions are received by the Democratic Services Team by <u>5pm on Thursday 15th January 2015</u>.

5 MINUTES OF THE MEETING OF CARE SERVICES PDS COMMITTEE MEETING HELD ON 11TH NOVEMBER 2014 (Pages 5 - 16)

6 MATTERS ARISING AND WORK PROGRAMME (Pages 17 - 22)

HOLDING THE PORTFOLIO HOLDER AND EXECUTIVE TO ACCOUNT

7 PRE-DECISION SCRUTINY OF CARE SERVICES PORTFOLIO REPORTS

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

- a CAPITAL PROGRAMME MONITORING 2ND QUARTER 2014/15 (Pages 23 - 28)
- b CARE SERVICES PORTFOLIO BUDGET MONITORING (Pages 29 - 44)
- c HEALTHWATCH BROMLEY CONTRACT (Pages 45 - 50)
- d CHANGES TO THE NON-RESIDENTIAL CONTRIBUTIONS POLICY AND THE DEFERRED PAYMENTS SCHEME (Pages 51 - 88)
- e BROMLEY CITIZENS ADVICE BUREAU CONTRACT EXTENSION (Pages 89 - 94)
- f ANNUAL QUALITY MONITORING REPORT 2014 (Pages 95 - 124)

8 PRE-DECISION SCRUTINY OF EXECUTIVE REPORTS

The Committee to consider items for the next meeting of the Executive on 11th February 2015.

- a CHILDREN'S SOCIAL CARE RECRUITMENT & RETENTION STRATEGY (Pages 125 - 138)
- **b** GATEWAY REPORT ON TENANCY SUSTAINMENT SERVICES FOR YOUNG PEOPLE (Pages 139 - 148)
- c DEPRIVATION OF LIBERTY SAFEGUARDS (DOLS) UPDATE (Pages 149 160)

POLICY DEVELOPMENT AND OTHER ITEMS

9 DRAFT CARE SERVICES PORTFOLIO HOLDER BUDGET 2015/16 (Pages 161 - 178)

10 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The briefing comprises:

- Bromley Safeguarding Children's Board Annual Report 2013/14
- ECHS Contract Activity Update 2014/15

Members and Co-opted Members have been provided with advance 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?Cld=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 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

12 PRE-DECISION SCRUTINY OF PART 2 CARE SERVICES PORTFOLIO REPORT

The Committee to consider a part 2 report for pre-decision scrutiny.

a SUPPORTED LIVING LEARNING DISABILITY - CONTRACT ARRANGEMENTS FOR SERVICES FOR PEOPLE WITH LEARNING DISABILITIES AT 26 DEVONSHIRE ROAD (Pages 179 - 184)

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

Mottingham & Chislehurst North Ward

13 PRE-DECISION SCRUTINY OF PART 2 EXECUTIVE REPORTS

The Committee to consider part 2 Executive reports for pre-decision scrutiny.

a GATEWAY REVIEW - PROCUREMENT STRATEGY FOR SUPPORTED LIVING LEARNING DISABILITY SCHEMES (Pages 185 - 190) Information relating to the financial or business affairs of any particular person (including the authority holding that information)

b DIRECT CARE UPDATE (Pages 191 - 204) Information relating to the financial or business affairs of any particular person (including the authority holding that information)

c EXTRA CARE HOUSING - SUPPLY & DEMAND (To Follow)

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

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Agenda Item 5

CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

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

Present:

Councillor Pauline Tunnicliffe (Chairman)

Councillors Ruth Bennett, Mary Cooke, Judi Ellis, Peter Fookes, Hannah Gray, Terence Nathan, Charles Rideout and Melanie Stevens

Sarah Dowding, Maureen Falloon, Linda Gabriel, Justine Godbeer, Tia Lovick and Catherine Osborn

Also Present:

Councillor Robert Evans, Councillor Diane Smith and Daniel Wadey

42 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

The Chairman welcomed Tia Lovick and Daniel Wadey to their first meeting.

Apologies were received from Councillor David Jefferys and from Joanna Frizelle – Justine Godbeer attended as her alternate. Stewart Tight had resigned from the Committee and Peter Moore, his alternate, sent apologies.

43 CO-OPTED MEMBERS Report CSD14151

The Committee was informed that the Living in Care Council had requested that its representatives on the Committee be changed.

The Committee also noted that Stewart Tight had resigned as the representative for Bromley Mental Health Forum – the Forum would be nominating a replacement in due course. The Chairman reported that she would write to Mr Tight thanking him for his service.

RESOLVED that Tia Lovick and Daniel Wadey be appointed to the Committee (and the Health Scrutiny Sub-Committee) as co-opted member and alternate representing the Living in Care Council.

44 DECLARATIONS OF INTEREST

In relation to Minute 49(D) (Older People Day Opportunity Services Investment) Councillor Peter Fookes declared that he was a Trustee of Melvin

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Hall and therefore a service provider Maureen Falloon declared that her organisation was also a service provider.

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

No questions had been received for the Committee.

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

Three questions for written reply had been received from Mrs Susan Sulis, Secretary of the Community Care Protection Group. The questions and replies are set out in Appendix 1 to these minutes.

47 MINUTES OF THE MEETING OF CARE SERVICES PDS COMMITTEE MEETING HELD ON 2ND OCTOBER 2014 (EXCLUDING EXEMPT INFORMATION)

In relation to Minute 34 (Feedback from the Adult Stakeholder Conference) Justine Godbeer reported that no feedback had been received as yet. She also commented that Bromley Experts by Experience should have been mentioned in the reply to the question at the last meeting and that they had not been informed about the Council's budget consultation events. It was confirmed that there were four events in total; two were aimed at residents associations and two were public meetings – at Orpington Methodist Church at 7pm on 20th November and at the Civic Centre at 11am on 28th November. Details of the public meetings had been widely publicised including on the Council website and in the Newshopper.

In relation to minute 33 (D), Councillor Peter Fookes asked when the Adult Social Care Gateway Report was due to come to Members. The report was now due to be considered at the special Portfolio Holder's meeting arranged for 11th December if ready.

In relation to minute 31 (Work Programme), the Portfolio Holder emphasised how effective the Council's placements processes were, and repeated the invitation to Committee members to attend placement panels.

The following amendments to the minutes were proposed –

Minute 30 (Minutes) – first and seventh lines, change Bromley Mind to Bromley Mencap.

RESOLVED that, subject to this amendment, the minutes from the meeting held on 2^{nd} October 2014 (excluding exempt information) be confirmed.

48 MATTERS ARISING AND WORK PROGRAMME Report CSD14150

The Committee considered matters arising from previous meetings, its work programme and the schedule of visits.

The Chairman requested two reports for future meetings on (i) the contract with Kent Association for the Blind (KAB) and (ii) on young carers, including information about who they were caring for and what support was provided to them.

The Chairman reported that she had been very impressed by her visit to the Astley Centre, but she felt that the building was under-used. The Portfolio Holder confirmed that the Astley Centre was part of the market testing process for Learning Disability Day services. Councillor Fookes commented that some clients in this group would need space at the Centre, and asked whether there was a waiting list at some day centres. Officers were not aware of any waiting lists – indeed fewer users were choosing to use these services.

The Chairman updated members on the proposal for a joint Working Group with the Education PDS Committee. This would now focus on the effectiveness of Children's Centres and would now involve just one or two meetings. Councillors Mary Cooke and Judi Ellis had already been appointed to the Working Group by Education PDS Committee and Councillor Terence Nathan agreed to join them.

There was now a doubt about the date for the joint meeting with Education PDS Committee on 26th February – the Chairman offered to try to clarify this.

Members discussed whether there was also a need to look again at the Tackling Troubled Families initiative.

RESOLVED that Councillor Terence Nathan be added to the membership of the Working Group on Children's Centres.

49 PRE-DECISION SCRUTINY OF EXECUTIVE AND CARE SERVICES PORTFOLIO REPORTS

The Committee considered the following reports for pre-decision scrutiny prior to decisions being made by the Care Services Portfolio Holder or the Executive.

A) BUDGET MONITORING 2014/15 Report CS14109

The report set out the latest budget monitoring position for 2014/15 based on activity up to the end of September 2014. It was reported in addition that reductions of £100k had been identified in Mental Health Budgets.

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The Chairman asked about the budget pressures relating to Leaving Care Clients. Officers confirmed that resources within the Housing team were being used to support these young people in making housing benefit claims.

Within the Direct Care budgets there was a projected underspend on Reablement which related to staffing, but this was not cost-effective as it was likely to lead to increased costs within assessment and care management. It was difficult to fill these posts, and officers were looking at attracting different types of staff. An approach using Occupational Therapists had been tried in the past, but it was very difficult to recruit them now. It was confirmed that there had been an over achievement of income in the Extra Care Housing Service, despite there being voids.

The Committee discussed the position with Deprivation of Liberty Safeguards (DoLS) – the Director confirmed that following the Supreme Court judgement in March the expected full year cost to the Council was in the region of £800k, with only £200k funding provided. The requirements imposed by the Supreme Court could only be changed by legislation; Government had established a Law Review to investigate, but this was not expected to report until 2017.

RESOLVED that

(1) The following be noted:

- (i) The latest projected overspend of £2,768,000 is forecast on the controllable budget, based on information as at September 2014;
- (ii) The full year effect for 2015/16 of £4,557,000 as set out in section 4 of the report;
- (iii) The comments of the Executive Director in section 8 of the report.
- (2) The Care Services Portfolio Holder be recommended to approve the latest 2014/15 budget projection for the Care Services Portfolio.

B) INTEGRATED COMMUNITY EQUIPMENT SERVICES Report CS14097

The report summarised the contract with Medequip under the London Consortium Framework and sought authorisation to extend the current contract. Medequip had performed well and remaining with the Consortium provided economies of scale and greater combined purchasing power. The arrangements were an example of working successfully with the CCG and officers had ensured that health contributions were being received.

Members discussed the issues with returning equipment – it was not economic for many items to be collected, but there was an incentive in the

contract for higher value items to be collected. A Member suggested better signposting about this when equipment was delivered.

Equipment was provided following assessment by an Occupational Therapist, and retailers could become authorised assessors to ensure that people could purchase appropriate equipment. Officers had looked at a full retail model but this had been complex to administer and not viable. Housing associations provided some equipment, such as handrails, but not other aids.

RESOLVED that the Executive are recommended to agree the following:

- (1) An extension to the current contract with Medequip under the London Consortium Framework for a period of two years commencing on 2nd July 2015 as allowed for in the original agreement and in accordance with Contract Procedure Rule 23.7.3.
- (2) That during the period of extension the Council participates in a joint re-tendering exercise through the London Consortium.
- C) PUBLIC HEALTH COMMISSIONING 2015 16 Report CS14101

The Committee received a report setting out Public Health commissioning intentions for 2015/16.

The Committee noted in particular the intention to seek to commission Genito-Urinary Medicine (GUM) contracts jointly with around twenty other boroughs through the North East London Commissioning Support Unit. Members reported that there had been too many separate contracts in the past and problems with poor facilities in the borough. The Director of Public Health reported that the contracts had been rationalised and that there had been a significant improvement in services.

RESOLVED that the Executive be recommended to

- (1) Note the intention to continue to use a number of previously approved procurement mechanisms for the delivery of the Public Health Commissioning plan, including individual contracting, use of a framework agreement, service level agreements with local general practice and partnership arrangements with the local Bromley Clinical Commissioning Group.
- (2) Note that Public Health take on a new commissioning responsibility for Health Visiting from October 2015 as advocated nationally by the Department of Health; this service, like a number of others, will continue to be provided by Bromley Healthcare, the commissioning arrangements of which have been made through a Section 75 agreement with Bromley Clinical Commissioning Group.

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- (3) Approve the intention to pursue a cross-London solution for the commissioning of Genito-Urinary Medicine (GUM) services and enter into an arrangement with North East London Commissioning Support Unit which proposes to negotiate the local tariff on behalf of 20 London Boroughs (any such arrangement will therefore be exempt from the Council's contract procedure rules.)
- (4) Approve that if a cross-London solution proves not to be viable, the Council continues with its current arrangement of procuring GUM services through Bromley Clinical Commissioning Group using a Section 75 agreement for 2015/16 (this arrangement will require a continuation of the existing exemption from the Council's contract procedure rules for the next financial year.)
- (5) Approve the continued use of Service Level Agreements for services offered by General Practitioners for 2015/16 by granting an exemption as per sections 3 and 13 of the contract procedure rules.

D) OLDER PEOPLE DAY OPPORTUNITY SERVICES INVESTMENT

In February 2013 the Executive had approved a commissioning strategy for older people's day opportunity services and respite at home services. Two year transitional arrangements to protect existing service users were outlined and a system for new clients, in which they would receive a Personal Budget allocation instead of a direct service referral, was described. A one-off investment from the NHS Social Care Fund was allocated to the project as Invest To Save to achieve the required efficiencies.

The transitional arrangements were reaching the final phase and it was now possible to consider the actual changes against the original projections and to project the likely final outturn on the Invest to Save investment. It was also appropriate to consider the next steps for the day opportunity services to ensure that the momentum of change was not dissipated once the transition period had ended and that services continued to develop in order to meet projected future demand. It was proposed that an Innovation and Development Fund be set up to support existing providers to make further changes and improvements to services. This would be £260k over two years.

Members asked about day centre attendance figures. At the start of the transition period in April 2013 there were about 650 service users; this had now reduced to about 500, continuing the trajectory of previous years. However, the level of need of people accessing services was increasing – particularly regarding dementia. A co-opted member commented that many older people objected to having to pay for day services on principle – they felt that government was breaking its contract with them.

It was confirmed that transport would continue to be an essential part of the service but that alternative means of transport would be explored through the draft adult transport policy. Most people used the Council's in-house service, but three of the providers operated their own transport. A sum of £200k was provided for this to continue in the transitional funding arrangements.

The Committee discussed personal budgets and direct payments. It was clarified that all people coming forward for services now would have personal budgets, but this did not necessarily translate into direct payments. A small pilot project was providing support to help people to move into direct payments.

RESOLVED that the Executive be recommended to approve the investment proposal for an Innovation and Development Fund as outlined in paragraphs 3.17 to 3.19 of the report.

E) GATEWAY REPORT ON SPECIALIST ADVOCACY AND ADVOCACY SERVICES FOR ADULTS Report CS14089

The report set out options for the future delivery of advocacy support services for older people with mental health, older people with physical and sensory disabilities, learning disabilities and general advocacy in the borough. There were currently four contracts, with different inputs and differences in unit costs. These were statutory services, with the exception of the service for adults, but this would become statutory from April 2015 under the Health and Social Care Act 2012. The Chairman commented that it would have been useful to include a glossary in the report.

RESOLVED that the Portfolio holder is recommended to

- (1) Approve the recommendation to tender the IMCA and the IMHA services for a three year contract from April 2015 with the potential to extend for a further two years.
- (2) Agree the four borough commissioning approach to the delivery of the IMCA service from April 2015 with the Council leading on the procurement on behalf of the consortium of Bromley, Bexley, Lewisham and Greenwich boroughs.
- (3) Agree the tendering of a new advocacy service based on a new specification to meet the requirements of the Care Act and starting in October 2015.
- (4) Agree an extension of one year from April 2015 for NHS Advocacy Contract with VOICEABILITY in the consortium of 27 London Boroughs.

50 UPDATE ON ECHS INVEST TO SAVE PROJECTS Report CS14110

The Committee received an update on four of the Education, Care and Health Services Department's invest to Save/Contain initiatives –

- Dementia
- PDSI

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- Children's Social Care
- Bellegrove Temporary Accommodation

The Director accepted that all four projects had taken time to get started, partly as it had been difficult to recruit the right high quality people to the fixed term posts required, but two of the schemes, Bellegrove and Children's Social Care had been very successful. The two adult social care schemes had been less successful; a Member questioned whether more investment should be allowed, but officers reported that progress was now being made.

The Committee discussed the Bellegrove scheme, which had successfully generated savings beyond targets and would repay the initial investment by 2015/16. The scheme was very well managed by Orchard and Shipman; Councillor Judi Ellis did report on one occasion when a repair was required but it was stated by officers that such repairs were usually completed with a minimum of delay after the agent became aware of them. It was clarified that although refurbishment costs were not included in the funding, maintenance was provided for; the Director had not had any complaints brought to his attention and it was likely that any problems reported were quickly dealt with. A Member asked whether there was scope for using other properties for similar schemes; the Portfolio Holder responded that he hoped to have the scheme at Manorfields operating soon.

RESOLVED that the progress made in each of the schemes be noted, and that a further update be provided to a future meeting.

51 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING

The information briefing comprised five reports as follows -

- Annual Corporate Parenting Report 2013/14
- Adult Social Care Local Account 2014
- Care Services Portfolio Plan Priorities June 2014 May 2015
- Housing Services 2014/15 Priorities Update
- Education Outcomes for Looked After Children

No questions had been received.

52 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.

The following summaries refer to matters involving exempt information

53 EXEMPT MINUTES OF THE CARE SERVICES PDS COMMITTEE MEETING HELD ON 2ND OCTOBER 2014

RESOLVED that the exempt minutes of the meeting held on 2nd October 2014 be agreed.

54 QUESTIONS ON THE CARE SERVICES PDS INFORMATION BRIEFING - PART 2

No questions had been received.

The Meeting ended at 8.29 pm.

Chairman

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CARE SERVICES PDS COMMITTEE

11 NOVEMBER 2014

QUESTIONS TO THE CARE SERVICES PORTFOLIO HOLDER

From Susan Sulis, Secretary, Community Care Protection Group

(1) BROMLEY COUNCIL CARE SERVICES PROTOCOLS FOR NEEDS ASSESSMENTS; FINANCIAL ASSESSMENTS; CARE PLANS; REVIEWS; PERSONAL BUDGETS AND DIRECT PAYMENTS.

- (a) Does the Council have a Protocol staff observe when:-
 - (i) Assessing care needs?
 - (ii) Formulating care plans?
 - (iii) Assessing financial contributions?
 - (iv) Carrying out reviews?
 - (v) Formulating Personal Budgets?
 - (vi) Offering Direct Payments?

Reply:

Yes, the Council has a protocol.

(b) If so, where can this protocol be viewed?

Reply:

The Council has a protocol - A guide to assessment and care management – which can be viewed on OneBromley - this is a guide for staff. If the public request, a shorter version is available. The guide discusses the care pathway from assessment to eligibility and personalisation, it is quite comprehensive in its detail, giving responses to the questions asked.

(c) How and when are the Assessments, Plans and Budgets explained to users and carers?

Reply:

Where we use third party providers to deliver care we expect them to undertake a risk assessment and then work up a support plan which includes the views of the Service User and their next of kin. The service user will be asked to sign to confirm their involvement. This requirement is set out in our service specifications.

(2) (a) Are users and carers (where users lack capacity), always given copies of the documents above (i) in draft form for discussion? (ii) in final, agreed form?

Reply:

The assessment process includes discussion and confirmation of a persons assessed needs with the cared for as well as (where appropriate) their carer. Once agreed there is sign off and users given a copy.

(b) What procedures do other agencies, contracted to provide elements of this service, follow?

Reply:

Where we use third party providers to deliver care we expect them to undertake a risk assessment and then work up a support plan which includes the views of the Service User and their next of kin. The service user will be asked to sign to confirm their involvement. This requirement is set out in our service specifications

(c) Who is responsible for collating and producing integrated assessments and care plans?

Reply:

Care managers lead on the assessment process assessing and detailing need as appropriate, as and when required they will involve other professionals such as occupational therapists etc. and collate and present an integrated assessment, detailing unmet needs.

(3) RESPONSIBILITY FOR OFFERING BENEFITS ADVICE DURING THE ASSESSMENT PROCESS, TO USERS AND CARERS ELIGIBLE FOR CARE SERVICES UNDER 'FAIR ACCESS TO CARE SERVICES'

(a) At what stage, during the Financial Assessment, do staff offer/arrange advice to the user and/or carer on their eligibility for benefits?

Reply:

Welfare benefit advice is given to service users by the Visiting Officer at the financial assessment meeting with the service user and/or their representative. Where the Visiting Officer has not been able to meet with the service user and/or their representative, advice will be given in writing following receipt of the completed financial assessment form.

The Council does not carry out a financial assessment for carers as they do not currently charge for carers services.

(b) How is this taken into account in assessing their financial contribution?

Reply:

Service users are charged for services according to their current income and expenditure at the time of the financial assessment.

(c) Are users or carers charged for services prior to being assessed for benefits?

Reply:

If there are any benefits that the service user may be entitled to then the Visiting Officer will assist them with making a claim. If necessary a further appointment will be made to complete the claim forms. If the claim is successful then a new financial assessment will be completed to include the additional benefits from the date they were awarded.

Agenda Item 6

Report No. CSD15005 London Borough of Bromley

PART ONE - PUBLIC

Decision Maker:	CARE SERVICES POLICY DEVELOPN	IENT AND SCRUTINY C	OMMITTEE			
Date:	21 January 2015					
Decision Type:	Non-Urgent	Non-Executive	Non-Key			
Title:	MATTERS ARISING	AND WORK PROGRAM	I ME			
Contact Officer:	Graham Walton, Democratic Services Manager Tel: 0208 461 7743 E-mail: graham.walton@bromley.gov.uk					
Chief Officer:	Mark Bowen, Director of	Corporate Services				
Ward:	N/A					

1. <u>Reason for report</u>

1.1 The Committee is asked to review its work programme for 2014/15, the programme of visits to day centres and residential homes and matters arising from previous meetings.

2. **RECOMMENDATION**

The Committee is requested to consider its work programme, list of visits and matters arising and indicate any changes that are necessary.

Corporate Policy

- 1. Policy Status: Existing Policy: As part of the Excellent Council workstream within Building a Better Bromley PDS Committees should plan and prioritise their workloads to achieve the most effective outcomes.
- 2. BBB Priority: Children and Young People Excellent Council Supporting Independence:

Financial

- 1. Cost of proposal: No Cost:
- 2. Ongoing costs: Not Applicable:
- 3. Budget head/performance centre: Democratic Services
- 4. Total current budget for this head: £373,410
- 5. Source of funding: 2014/15 revenue budget

<u>Staff</u>

- 1. Number of staff (current and additional): 10 posts (8.72 fte)
- 2. If from existing staff resources, number of staff hours: Maintaining the Committee's work programme takes less than an hour per meeting

<u>Legal</u>

- 1. Legal Requirement: None:
- 2. Call-in: Not Applicable: This report does not involve an executive decision

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): This report is intended primarily for the benefit of members of this Committee to use in controlling their work

Ward Councillor Views

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

3. COMMENTARY

- 3.1 The Committee's matters arising table is attached at **Appendix 1. Th**is updates Members on recommendations from previous meetings which continue to be "live". Currently there are six items listed; items are removed from the schedule as they are completed.
- 3.2 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.
- 3.3 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.
- 3.4 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 services, including health services; and that the programme is realistic in terms of Member time and officer support capacity.
- 3.5 The autumn schedule of visits to care homes and day centres has been completed. The table in **Appendix 3** provides information on the visits and the names of PDS members who have attended. The new schedule of visits is currently being planned.

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

Matters Arising 2014/15 progress summary

PDS Minute number/ title	Committee Request	Update	Completion Date		
Minute 134 (A) 29 October 2013 Children's Social Care Recruitment and Retention Strategy	Officers requested to develop proposed scheme and report back to the committee	Added to the work programme	January 2015		
Minute 159 22 January 2014 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.	e reported to the committee Programme.			
Minute 40/1 2 nd October 2014 LD Supported Living Contract Award	Committee visits to be arranged to these schemes.				
Minute 48 11 November 2014 Work Programme	Chairman requested a report on Young Carers	Added to Work programme	To be scheduled		
Minute 48 11 November 2014 Work Programme	ember 2014 Working Group with December 2014 (as a		December 2014		
Minute 48 11 th November 2014 Work Programme	th November 2014 Education PDS Committee		February 2015		

Work Programme 2014/15

Capital Monitoring 2014/15 Regular Status repo	Title	Notes
Care Services PDS - 4 March 2015 (7pm) Portfolio Plan Update 2014/15 Housing Priorities Update 2014/15 Care Services Portfolio Budget Monitoring 2014/15 Care Services Portfolio Budget Monitoring 2014/15 Capital Monitoring 2014/15 Regular Status report Regular Status report Bromley Welfare Fund Changes to the Domiciliary Care Contract Framework Draft Disability Strategy Gateway Review of the Social Information Systems Update on the Adults Transport Policy consultation Children's Pledge Review of Foster Carer Payments Supporting LAC in University & Higher Education Adoption Update – performance and grant drawdown Health Scrutiny Sub Committee – 15 th April 2015 (4.30pm) HSSC Work Programme Update from Kings on the PRUH Improvement Plan Integrated Services Programme (BCF) Update Outcomes of the Weight management Pilot Project Update	Health & Wellbeing Board – 29 th January 2015 (1.30pm)	
Portfolio Plan Update 2014/15 Image: Contract Provided P	Joint Care Services & Education PDS – 25 February 2015 (7pm)	
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Integrated Services Programme (BCF) Update Outcomes of the Weight management Pilot Project Update	HSSC Work Programme	
Outcomes of the Weight management Pilot Project Update	Update from Kings on the PRUH Improvement Plan	
	Integrated Services Programme (BCF)	Update
Academic Health Services Networks Update	Outcomes of the Weight management Pilot Project	Update
	Academic Health Services Networks	Update
Care Services PDS reports to be scheduled	Care Services PDS reports to be scheduled	
Young Carers	Young Carers	
Welfare Reform Update – including fraud detection initiatives	Welfare Reform Update – including fraud detection initiatives	
KAB Contract Overview	KAB Contract Overview	
Adult Social Care Gateway Review	Adult Social Care Gateway Review	

Member Visits – Autumn 2014

Establishment Name	PDS Members	Status
Ashglade House	Cllr Peter Fookes Cllr Terry Nathan	Completed
	Cllr Kim Botting	
Bromley Park Dementia Nursing Home	Cllr Peter Fookes Cllr Terry Nathan Cllr Peter Fortune Mylene Williams (co-opted)	Completed
Astley & Cotmandene Day Centres	Cllr Mary Cooke Cllr Peter Fookes Cllr Robert Evans Cllr Pauline Tunnicliffe	Completed
Fairlight and Fallowfield Care Home	Cllr Peter Fookes Cllr Terry Nathan Cllr Hannah Gray	Cancelled due to illness –being rearranged Feb 2015
Widmore Road Respite Centre	Cllr Kathy Bance Cllr Judith Ellis Cllr Peter Fookes Ms Leslie Marks (Co-Opted Member) Ms Joan McConnell (Co- Opted Member)	Completed
Learning Disability Supported Living Scheme	3 places available	Being arranged for Feb 2015

The following feedback has been received following the above visits

"...what a great time residents had with the visit from Cllrs...thank them for coming..."

"I was impressed with the staff, care of the residents and facilities available within this home."

"The home felt warm, friendly and clean."

Agenda Item 7a

Report No. FSD14082 London Borough of Bromley

PART ONE - PUBLIC

Decision Maker:	CARE SERVICES PO	ORTFOLIO HOLDER	
Date:	For pre-decision scruti January 2015	ny by the Care Services PI	OS Committee on 21st
Decision Type:	Non-Urgent	Non-Executive	Non-Key
Title:	CAPITAL PROGRAM	MME MONITORING - 2 ^{NI}	⁰ QUARTER 2014/15
Contact Officer:		Accountant (Technical & Co mail: martin.reeves@bromle	
Chief Officer:	Director of Finance		
Ward:	All		

1. Reason for report

On 26th November 2014, the Executive received the 2nd quarterly capital monitoring report for 2014/15 and agreed a revised Capital Programme for the four year period 2014/15 to 2017/18. This report highlights in paragraphs 3.1 to 3.3 changes agreed by the Executive in respect of the Capital Programme for the Care Services Portfolio. The revised programme for this portfolio is set out in Appendix A, and detailed comments on scheme progress as at the end of the first half of 2014/15 are shown in Appendix B.

2. RECOMMENDATION(S)

The Portfolio Holder is asked to note and confirm the changes agreed by the Executive in November.

Corporate Policy

- 1. Policy Status: Existing Policy: Capital Programme monitoring and review is part of the planning and review process for all services. Capital schemes help to maintain and improve the quality of life in the borough. Affective asset management planning (AMP) is a crucial corporate activity if a local authority is to achieve its corporate and service aims and objectives and deliver its services. The Council continuously reviews its property assets and service users are regularly asked to justify their continued use of the property. For each of our portfolios and service priorities, we review our main aims and outcomes through the AMP process and identify those that require the use of capital assets. Our primary concern is to ensure that capital investment provides value for money and matches the Council's overall priorities as set out in the Community Plan and in "Building a Better Bromley".
- 2. BBB Priority: Excellent Council

Financial

- 1. Cost of proposal: Total increase of £0.3m over the 4 years 2014/15 to 2017/18.
- 2. Ongoing costs: Not Applicable
- 3. Budget head/performance centre: Capital Programme
- 4. Total current budget for this head: £10.2m for the Care Services Portfolio over four years 2014/15 to 2017/18
- 5. Source of funding: Capital grants, capital receipts and earmarked revenue contributions

<u>Staff</u>

- 1. Number of staff (current and additional): 1 fte
- 2. If from existing staff resources, number of staff hours: 36 hours per week

Legal

- 1. Legal Requirement: Non-Statutory Government Guidance
- 2. Call-in: Not Applicable

Customer Impact

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

Ward Councillor Views

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

3. COMMENTARY

Capital Monitoring – variations agreed by the Executive on 26th November 2014

3.1 A revised Capital Programme was approved by the Executive in November, following a detailed monitoring exercise carried out after the 2nd quarter of 2014/15. The base position was the revised programme approved by the Executive on 16th July 2014, as amended by variations approved at subsequent Executive meetings. All changes on schemes in the Care Services Programme are itemised in the table below and further details are included in paragraphs 3.2 to 3.3. The revised Programme for the Care Services Portfolio is attached as Appendix A. Appendix B shows actual spend against budget at the end of the first half of 2014/15, together with detailed comments on individual schemes.

					TOTAL 2014/15 to
	2014/15	2015/16	2016/17	2017/18	2017/18
	£000	£000	£000	£000	£000
Programme approved by Executive 16/07/14	6,815	2,062	952	10	9,839
Manorfields - Temporary Accomodation (Executive 15/10/14)	450	113			563
Approved budget prior to Q2 monitoring	7,265	2,175	952	10	10,402
Variations approved by Executive 26/11/14					
Disabled Facilities Grants (see para 3.2)	-249				-249
Schemes rephased from 2014/15 into later years (see para 3.3)	-2,612	2,434	178		0
Total Amendment to the Capital Programme	-2,861	2,434	178	0	-249
Total Revised Care Services Programme	4,404	4,609	1,130	10	10,153

3.2 Disabled Facilities Grants – (£249k decrease)

The November Executive report informed Members that confirmation has been received that Bromley's allocation of DFG grant will be £743k in 2014/15 and £942k in 2015/16. In the Quarter 1 monitoring report, the 2014/15 allocation was incorrectly reported as £992k and the Capital Programme budget now needs to be reduced by £249k to reflect the correct level of grant support.

3.3 <u>Schemes rephased from 2014/15 into later years</u>

As part of the 2nd quarter monitoring exercise, £2,612k has been re-phased from 2014/15 into 2015/16 (£2,434k), and 2016/17 (£178k) to reflect revised estimates of when expenditure on the Care Services schemes is likely to be incurred. This has no overall impact on the total approved estimate for the capital programme. Further details and comments are provided in Appendix B.

Post-Completion Reports

3.4 Under approved Capital Programme procedures, capital schemes should be subject to a postcompletion review within one year of completion. After major slippage of expenditure in recent years, Members confirmed the importance of these as part of the overall capital monitoring framework. These reviews should compare actual expenditure against budget and evaluate the achievement of the scheme's non-financial objectives. One post-completion report, on the Bellegrove temporary accommodation scheme, is due to be submitted in 2014/15 for the Care Services Portfolio and this quarterly report will monitor the future position and will highlight any further reports required.

4. POLICY IMPLICATIONS

4.1 Capital Programme monitoring and review is part of the planning and review process for all services.

5. FINANCIAL IMPLICATIONS

5.1 These were reported in full to the Executive on 26th November 2014. Changes agreed by the Executive for the Care Services Portfolio Capital Programme are set out in the table in paragraph 3.1.

Non-Applicable Sections:	Legal and Personnel Implications		
Background Documents:	Departmental monitoring returns October 2014.		
(Access via Contact	Approved Capital Programme (Executive 16/07/14).		
Officer)	Q2 monitoring report (Executive 26/11/14).		

Appendix A

	CARE SERVICES PORTFOLIO - APPROVED CAPITAL PROGRAMME 26th NOVEMBER 2014								
		Total							
		Approved	Actual to	Estimate	Estimate	Estimate	Estimate		
Code	Capital Scheme/Project	Estimate	31.3.14	2014/15	2015/16	2016/17	2017/18	Responsible Officer	Remarks
		£'000's	£'000's	£'000's	£'000's	£'000's	£'000's		
	SOCIAL CARE								
950802	Care Homes - improvements to environment for older people	290	288	2	0	0	0	Lorna Blackwood	100% government grant
	PCT Learning Disability reprovision programme	11004	10154	0	850	0			Fully funded by PCT
	Social care grant	3079	125	935	2019	0	-	Lorna Blackwood	100% government grant
	Mental health grant	331	5	0	326	0	0	Lorna Blackwood	100% government grant
	Supporting Independence - Extra Care Housing	20	1	19	0	0			100% government grant
	Transforming Social care	145	77	68	0	0		Angela Buchanan	100% government grant
	Manorfield - Temporary Accommodation	563	0	450	113	0		Sara Bowrey	
907562	Mobile technology to support children's social workers	71	39	0	32	0	0	Kay Weiss	100% grant
950000	Feasibilty Studies	40	0	10	10	10	10	David Bradshaw	
	TOTAL SOCIAL CARE	15543	10689	1484	3350	10	10		
	HOUSING								
950792	Payment in Lieu Fund - unallocated	4550	3521	962	67	0	0	Kerry O'Driscoll	Expenditure subject to cash receipts (S106) from Affordable Housing Policy
011110	l	2400	0004	400	180	178		Otava Uahaaad	
	London private sector renewal schemes	3169	2681	130	180	1/8			100% external funding
	Empty Homes Programme Renovation Grants - Disabled Facilities	450 8710	47 5540	403 1286	0 942	0 942		Steve Habgood	100% external funding
916xxx	TOTAL HOUSING	16879	11789	2781	942 1189	942 1120	0	Steve Habgood	Govt grant £743k in 2014/15 and assume £942k pa in 2015/16 and 2016/17
	TOTAL HOUSING	10079	11/09	2701	1109	1120	0		
	OTHER								
	Star Lane Traveller Site	250	41	139	70	0	٥	Sara Bowrey	Urgent water and drainage works (statutory duty)
041020		200	41	.55	70	0	0	Sala Domoy	orgonic materiana analinago wonto (otatatory daty)
	TOTAL OTHER	250	41	139	70	0	0		
		200		100		5	Ū		
	TOTAL CARE SERVICES PORTFOLIO	32672	22519	4404	4609	1130	10		

Appendix B

	CARE SERVICES PORTFOLIO - APPROVED CAPITAL PROGRAM	IME 26th NOV				
[A	Approved	A	Revised	
Code	Capital Scheme/Project	Actual to 31.3.14	Estimate Jul 2014	Actual to 18.09.14	Estimate Nov 2014	Responsible Officer Comments
COUC		£'000's	£'000's	£'000's	£'000's	
	SOCIAL CARE					
950802	Care Homes - improvements to environment for older people	288	2	0	2	This funding was provided to support care homes in the voluntary/independent sector to improve the environment in care homes for older people. Care homes are able to "bid" to the Council for this funding and there are criteria agreed for this.
950804	PCT Learning Disability reprovision programme	10154	0	-52	0	The capital is for uses associated with the reprovision of NHS Campus clients to the community and projects relating to the closure of the Bassetts site. For 14/15 expenditure - we still await final invoices for 3 schemes (118 Widmore Road, 44 Bromley Road and the CLDT move to Penge) and current year forecast is £0. £850K carried forward into 15/16. This is predominantly going to be used for alternative day service provision following the closure of the Bassetts day centre. LD day activities are currently being reviewed and expenditure is not expected to occur until 15/16. Please note that the NHS are entitled to require the return of the remaining
	Social care grant Mental health grant	125	2954 326	0		capital sum. This funding is made available to support reform of adult social care services. To date, these have been funded by the Council. As the new legislation for adult social care becomes clearer it is likely that this funding will be used to support the changes required. £175k has been committed. This is for the capital works to Council owned learning disability properties as agreed by Executive in 2013. Bid for £260k is being considered in respect of proposed investment in older people day opportunity services. We may also be bidding for some funding for extra care housing in Jan 2015 and need to keep a further £500k at this stage in 14/15. Rephased the remaining is made available to support reform of adult social care services. To date, these have been funded by the Council. As the new legislation for adult social care becomes clearer it is likely that this funding will be
950815	Supporting Independence - Extra Care Housing	1	19	5	19	used to support the changes required. Rephased £326k into 15/16 This funding is available for specialist equipment/adaptations in extra care housing to enable schemes to support people with dementia or severe physical disabilities.
950816	Transforming Social care	77	68	0	68	We plan to use this money during 14/15 to support the SCIS gateway review process.
950818	Manorfields - Temporary Accommodation	0	0	0	450	£563k approved by Executive 15/10/14 for the refurbishment at Manorfields. We intend to complete 80% of the project in 14/15 and remaining 20% in 15/16 subject to planning permission
907562	Mobile technology to support children's social workers	39	32	0	0	We are unable to progress the mobile working plans and expenditure during the roll out of Windows 7 and data protection issues are resolved. Rephased £32k into 15/16.
950000	Feasibilty Studies TOTAL SOCIAL CARE	0 10689	10 3411	0 -47	10 1484	
950792	HOUSING Payment in Lieu Fund - unallocated	3521	962	434	962	Spend for Site K allocation of £605,000 (start on site tranche) is now expected to be delayed until Qtr 4 14/15 based on some delays in the early stages of the development. The remaining expenditure related to the acquisition of residential properties is expected to be concluded in Qtr 3 14/15
914110	London private sector renewal schemes	2681	295	25	130	Discussions planned with AD (Adult Social Care) to consider changing criteria to help most vulnerable, in order to best target funding. Applications for empty property work are being funded through Empty Homes Programme (which ends March 2015). A training session for care managers and other social services staff has been arranged in Oct to maximise the benefit of this funding. Rephased £165k from 14/15, £13k from 15/16 into 16/17 (£178k) as the work will continue beyond 14/15.
950501	Empty Homes Programme	47	403	34	403	Take-up has increased and the scheme is being heavily targetted. 13 additional potential properties have been identified and negotiations are underway.
	Renovation Grants - Disabled Facilities	5540	1535	447	1286	In Qtr 1 14/15 monitoring, we assumed that there would be additional grants of £282k. However, it should be £33k instead, as the additional grants comes into effect from 15/16.
e	TOTAL HOUSING	11789	3195	940	2781	
N	OTHER Star Lane Traveller Site	41	209	0	139	The property division have now commenced this project and are currently working through the full specification with Thames Water. At this stage they are confident that the work will progress during the current financial year, however the full specification has not been completed yet. It is likely that the completion date will be in Qtr1 15/16. Rephased £70k into the next financial year
	TOTAL OTHER	41	209	0	139	
	TOTAL CARE SERVICES PORTFOLIO	22519	6815	893	4404	
			5310	000	.+0+	1

Agenda Item 7b

Report No. CS14114 London Borough of Bromley

PART ONE - PUBLIC

Decision Maker:	CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE						
Date:	21 st January 2015						
Decision Type:	Urgent	Non-Executive	Non-Key				
Title:	BUDGET MONITOR	RING 2014/15					
Contact Officer:		of Education, Care & Health ·mail: David.Bradshaw@bro					
Chief Officer:	Terry Parkin, Executive	Director of Education, Care	& Health Services				
Ward:	(All Wards);						

1. <u>Reason for report</u>

1.1 This report provides the budget monitoring position for 2014/15 based on activity up to the end of November 2014.

2. RECOMMENDATION(S)

- 2.1 The Care Services PDS committee are invited to:
 - (i) Note that the latest projected overspend of £1,270,000 is forecast on the controllable budget, based on information as at November 2014;
 - (ii) Note the full year effect for 2015/16 of £3,022,000 as set out in section 4;
 - (iii) Note the comments of the Executive Director in section 8 of this report; and,
 - (iv) Refer the report to the Portfolio Holder for approval.
- 2.2 The Portfolio Holder is asked to approve the latest 2014/15 budget projection for the Care Services Portfolio.

Corporate Policy

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

<u>Financial</u>

- 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: £118.914m
- 5. Source of funding: Care Services Approved Budget

<u>Staff</u>

- 1. Number of staff (current and additional): 876 Full time equivilent
- 2. If from existing staff resources, number of staff hours: N/A

<u>Legal</u>

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

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The 2014/15 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 The 2014/15 projected outturn for the Care Services Portfolio is detailed in Appendix 1a, broken down over each division within the service. Appendix 1b gives explanatory notes on the movements in each service.

Adult Social Care and Commissioning - Care related costs

- 3.2 The placement budgets are projected to overspend in 2014/15 by £1,759k and £3,117k in a full year. The policy has been to keep people out of residential and into extra care housing or at home, as far as is professionally safe, as it is the frequently more cost effective and provides a better outcome for many service users (e.g. independence).
- 3.3 The overspend is, in the main, due to unexpected placements made at the end of 2013/14 following through into 2014/15 of £489k and the budget savings option for capping of social care costs totalling £1,450k that has not yet been delivered. There is also increased pressures on areas such as Mental Health services that has seen a rise in placements being made This will have to be addressed to manage the overspend as this leads to further cost pressures following into 2015/16.
- 3.4 The overspends have been offset by a number of underspends which include:
 - a) One off contribution from the Better Care Fund (£350k).

b) Reduced assumptions of potential growth placements in Learning Disability, deferred placements and attrition. (£340k).

- c) Increased income from court protection (£110k).
- d) Management action in mental health assumed to deliver by year end (£108k).
- e) Increases in other areas underspend from staffing, running expenses, etc (£133k).
- 3.5 This has meant that the overspend has reduced from the last reported overspend of £2,800k to £1,759k.

<u>Housing</u>

- 3.6 There are currently no pressures forecast in Temporary Accommodation (TA) (Bed and Breakfast) in 2014/15. Additional funding available in contingency has been drawn down which reduces the pressure to a net zero. Executive agreed on the 15th October 2014 that £653k of a possible £1.2m of contingency could be drawn down to alleviate pressures on this budget. The remaining contingency amount was agreed by Executive on the 15th October 2014 to be used for the development of Manorfields as temporary accommodation.
- 3.7 Although numbers are continuing to rise with an average of 15 per month expected during the remainder of the financial year, this is assumed within the financial projections. Officers are currently modelling different scenarios to quantify the effect of possible initiatives to limit the growth.

Children's Social Care

- 3.8 Care and resources is now expected to be underspent by the year end by £30k. Pressures in the Leaving Care budgets have been offset by reductions in the main placement budget. Moreover management action has been assumed to be delivering a further £200k by the year end.
- 3.9 Although a sum of £260k was approved in 2013/14 as growth for people with No Recourse to Public Funds (NRPF), pressures continue to rise in this area resulting in a projected overspend

of £247k for 2014/15. The full year effect of both for placements and NRPF will be £180k in 2015/16.

4. FULL YEAR EFFECT GOING INTO 2015/16

- 4.1 The cost pressures identified in section 3 above will impact in 2015/16 by £3,022k. This figure does not include £260k for Housing as it is likely to be able to be drawn down from the central contingency to alleviate Housing Pressures. Management action will need to be taken to ensure that the remaining £3,022k does not impact of future years.
- 4.2 This figure has reduced from £4.182m reported in November to the PDS.
- 4.2 Given the financial position facing the council over the next four years which has been identified as a funding gap of over £53m, officers will need to ensure that budgets are managed within the overall resources available or alternative savings identified.

5. EARLY WARNINGS

Deprivation of Liberty Safeguards (DOLS)

- 5.1 The recent Supreme Court judgement relating to Deprivation of Liberty Safeguards in March 2014 has meant that there is a potential pressure from increased volumes of assessments, legal fees and training. Applications for assessments have increased drastically. The monitoring has reflected this increase. In the last financial year the Council carried out 15 assessment requests. From April 2014 to the 19th December 2014 there have been 247 requests for assessment.
- 5.2 Further work is being carried out to assess the impact and we are awaiting further directions from government. The most recent indications suggest that the issue could cost the Council up to £628k.

6. POLICY IMPLICATIONS

- 6.1 The Resources Portfolio Plan includes the aim of effective monitoring and control of expenditure within budget and includes the target that each service department ill spend within its own budget.
- 6.2 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.
- 6.3 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.
- 6.4 Chief Officers and Departmental Heads of Finance are continuing to place emphasis on the need for strict compliance with the Council's budgetary control and monitoring arrangements.

7. FINANCIAL IMPLICATIONS

7.1 A detailed breakdown of the projected outturn by service area in shown in appendix 1(a) with explanatory notes in appendix 1(b). Appendix 1 (c) shows the latest full year effects. Appendix 2 gives the analysis of the latest approved budget. Other financial implications are contained in the body of this report and Appendix 1b provides more detailed notes on the major services.

7.2 Overall the current overspend position stands at £1,270k (£3,022k full year effect). The full year effect will have to be addressed in 2015/16 in due course.

8. DIRECTOR'S COMMENTS

- 8.1 As detailed in the appendix, the requirement from the Department of Health to introduce a new form of activity reporting in adult social care has caused very significant problems across the country and we have not been exempt from them. I am particularly grateful to staff in adult social care and in our strategy team who gave up time over weekends and indeed over the Christmas holiday to further debug the system. However, errors remain and this makes it difficult to pinpoint issues, and particularly so in the older people's budgets across Care Management and Mental Health. The bottom line is, however, accurate: nonetheless, further work needs to be done to reconcile expenditure across these budgets and to help us better understand the pressures in mental health.
- 8.2 We are awaiting determination from the CCG on £1.3m of our claims for continuing health care (CHC) contributions. This is a very complex area and the Care Policy Development and Scrutiny Committee have discussed this previously. Broadly, a number of our clients will have very clear *health* needs which, by Law, local government cannot usually fund. To facilitate, for example, rapid discharge from the Princess Royal, we will accept these clients and then claim retrospectively for any health needs. We would also make a claim for any assessed clients we believe have health needs. Historically, we have always struggled to gain agreement from our partners in the CCG as to the precise level of health contribution and these claims are presently under assessment by a contractor brought-in by the Clinical Commissioning Group. This contractor is retained by the CCG and so is not independent. However, we have seen very good progress with our complex children's packages, but we remain concerned that the CCG may not agree with our assessments. Should that be the case, we will need to agree an appeals procedure. It is not our expectation that we will win back all of the claimed monies.
- 8.3 Members will have seen the considerable progress in bringing the projected outturn nearer to the budgeted sums. We have held the number of older people's placements broadly static across the year but were required to reduce them by around 60: this simply has not proved possible. In addition, Members may recall the fact that some 20 or so care packages agreed late in 2013/14 were not funded in this year's budget placing a further £816k on the budget in addition to the agreed savings and the £1.45m efficiencies.
- 8.4 Across the last two quarters we have reduced the projected overspend by around £1.5m. We continue our regular programme of review, ensuring the best possible match between unmet assessed needs and the packages we provide to clients. We have held posts vacant, introduced robust approaches to awarding support and, more recently with support from the CCG, increased our ability to offer reablement. However, very considerable pressures remain in the system.
- 8.5 We see little let-up in the pressures from those requiring temporary accommodation, and the proposed provision of Manorfields should help mitigate at least some of those pressures, but staff in Housing remain under considerable pressure and are to be commended for their exceptional work in managing in very challenging circumstances. Closing or redesignating one of the extra care housing schemes as surplus to requirement is under discussion elsewhere. We also continue to see those with no recourse to public funds presenting to children's social care significantly in excess of the numbers funded by central government.
- 8.6 The changes in interpretation of the regulations around Deprivation of Liberty Safeguards (DoLS) have placed enormous pressure on the system this year and continues so to do. This is a major contributor to the pressures taken forward into next year, and will require a significant increase in staffing to manage efficiently. I am particularly grateful this year to staff who have

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accepted the challenge of developing our new approach to DoLS, often alongside their 'day job', but this is not sustainable.

- 8.7 Work with the CCG on the Better Care Fund resulted in our submission being approved, but not until after some small changes required by the NHS. This covers the spend of over £20m of funds held in common between the CCG and the Borough and so will form a key part of the work in the coming year. The monies for 14/15 allowed us to invest more in-year in supporting placements and, latterly, reablement, but sourcing high quality staff to undertake this additional remains a very significant challenge. The monitoring of this work is one of the responsibilities of the Health and Wellbeing Board but Members of the PDS will most likely also want to be kept informed of our progress in the coming year.
- 8.8 A key issue remains the ability of the PRUH to overcome its very considerable challenges. We continue to support it very heavily and have had staff working there case finding every weekend for several weeks now. There is an imperative to discharge patients as rapidly as possible. This results in some patients being discharged very early, typically to intermediate care, a contracted responsibility of Bromley Health Care from the CCG but one which, inevitably, places pressures on care managers where the patients require a social care assessment. These patients may, as a result of their early discharge, have additional unmet social care needs. To its very considerable credit, the CCG has been outstanding in committing itself to covering our additional costs but the reality is that this is bringing more clients to the notice of social care and if they are assessed as having unmet social needs, and are not self-funding, we must address them. Members can be assured that we are keeping detailed accounts of our activity in this area, and we remain very proud of the fact that there have been a negligible number of delayed discharges as a result of our social care staff. Where there are delays, these may be where a family disputes either our placement decision or, more typically, a costs determination.

Non-Applicable Sections:	Legal Implications Personnel Implications Customer Implications
Background Documents: (Access via Contact Officer)	2014/15 Budget Monitoring files in ECHS Finance Section

Care Services Budget Monitoring Summary - November 2014

2013/14 Actuals £'000	Division Service Areas	2014/15 Original Budget £'000	Latest Approved	-			Variation Last Reported £'000	Full Year Effect £'000
	EDUCATION, CARE & HEALTH SERVICES DEPARTMENT							
18 30,925	Adult Social Care AIDS-HIV Service Assessment and Care Management Adult Social Care Capping savings target not delivered Income from court protection	0 25,475	0 24,808	0 25,518 1,450 Cr 110	0 710 1,450 Cr 110	1 1	0 707 1,450 0	0 553 1,450 Cr 110
3,897 2,868 1,694 988	Management action - BCF contribution Direct Services Learning Disabilities Care Management Learning Disabilities Day and Short Breaks Service Learning Disabilities Housing & Support	3,269 2,052 2,100 1,562	3,335 2,298 2,091 1,383	3,297 2,384	Cr 350 Cr 38 86 Cr 150 Cr 102	4 1 2 3	0 Cr 7 195 Cr 119 Cr 97	0 265 Cr 150 Cr 102
40,390		34,458	33,915	35,411	1,496		2,129	1,906
4,571 Cr 1 Cr 778	Operational Housing Housing Needs Housing funds held in contingency Enabling Activities Housing Benefits	4,576 Cr 1 Cr 1,662		5,778 Cr 1 Cr 1,662	0 0 0	5	0 0 0	260 Cr 260 0 0
3,792		2,913	4,115	4,115	0		0	0
1,945 331 2,276	Strategic and Business Support Services Strategic & Business Support Learning & Development	2,198 394 2,592	2,201 394 2,595	2,070 271 2,341	Cr 131 Cr 123 Cr 254	6	Cr 121 Cr 60 Cr 181	0 0
	Children's Social Care	,	,					
14,413 1,544 3,373	Care and Resources Management action - Restriction of placements Safeguarding and Quality Assurance Safeguarding and Care Planning	17,238 1,402 3,499	1,426 3,499	3,499	Cr 38 0	}	290 Cr 38 0	0 0 0 0
3,615 765 4,025 27,735	Referral and Assessment Bromley Youth Support Programme Children's Disability Service	3,413 817 2,433 28,802	3,413 817 2,433 28,811	3,660 817 2,357 28,914	247 0 Cr 76 103		262 0 Cr 76 438	180 0 0 180
3,311 0 22,327 4,776	Commissioning Commissioning Information & Early Intervention Learning Disabilities Mental Health Services Mental Health Services - Management action	3,105 1,278 24,311 5,644 0		3,201 1,426 23,721 6,780 Cr 108	431 Cr 108	8 1 1 1	3 54 Cr 10 458 0	125 41 371 778 Cr 190
2,843 0 10,299 Cr 10,299	Supporting People NHS Support For Social Care - Expenditure - Income	2,060 4,548 Cr 4,548			0 0	9	Cr 146 0 0	Cr 189 0 0
33,257		36,398	36,978	36,880	Cr 98		359	936
12,229 Cr 12,601 Cr 372	Public Health Public Health Public Health - Grant Income	12,230 Cr 12,601 Cr 371		11,794 Cr 12,165 Cr 371	Cr 436 436 0		Cr 371 371 0	0 0 0
107,078	TOTAL CONTROLLABLE FOR ECHS DEPARTMENT	104,792	106,043	107,290	1,247		2,745	3,022
	ENVIRONMENT AND COMMUNITY SERVICES DEPARTMENT	<u>.</u>						
	Environmental Services - Housing							
179	Housing Improvement Management action to meet FYE	148	148	171	23	10	23	35 Cr 35
179	TOTAL CONTROLLABLE FOR E & CS DEPT	148	148	171	23		23	0
107,257	TOTAL CONTROLLABLE BUDGET FOR THE PORTFOLIO	104,940	106,191	107,461	1,270		2,768	3,022
2,073	TOTAL NON CONTROLLABLE	1,483	1,476	1,492	16		16	0
	TOTAL EXCLUDED RECHARGES	11,247	11,247	11,247	0		0	0
119,213	CARE SERVICES PORTFOLIO TOTAL	117,670	118,914	120,200	1,286		2,784	3,022

Appendix 1a (Cont'd)

2013/14	Division	2014/1	5 201	14/15	2014/15	Variation	Notes	Variation	Full Year
Actuals	Service Areas	Origina	l La	atest	Projected			Last	Effect
		Budge	t Appr	oved	Outturn			Reported	
£'000		£'00) ÷	2'000	£'000	£'000		£'000	£'000
MEMORAND	MEMORANDUM ITEMS								
	Invest to Save projects: Savings								
30	Dementia Investment Plan	Cr 515	Cr	515	Cr 237	278		278	0
216	PD Investment Plan	Cr 345	Cr	345	Cr 66	279		279	0
246	Invest to Save projects	Cr 860	Cr	860	Cr 303	557		557	0

£'000

REASONS FOR VARIATIONS

1. Adult Social Care and Commissioning - Care-Related Costs - Dr £1,759k

Adult Social Care:	2000
Assessment & Care Management (18-65 and 65+) Learning Disabilities Care Management (18-65 and 65+)	1,700 <u>86</u> 1,786
Commissioning:	
Learning Disabilities (18-65 and 65+) Mental Health (18-65 and 65+)	Cr 350 431
Mental Health (18-65 and 65+) - planned management action	Cr 108 Cr 27
Total Projected Overspend	1,759

As reported last cycle, a new Adult Social Care "Service Reporting Code of Practice" (SERCOP) was implemented with effect from 1st April 2014. This had significant implications for budget management and financial reporting structures. In addition, "Zero Based Review" data collection changes were effective from the same date.

The main areas of change have included re-classification of all adult social care clients according to their Primary Support Reason (PSR), including those clients over 65 who were all previously classified as "Older People" irrespective of their primary care need. Further, support now has a greater degree of classification between long term and short term support.

The new PSRs include: Physical Support; Sensory Support; Support with Memory and Cognition; Learning Disability Support; Mental Health Support. There is a further category of Social Support which includes support to Carers.

There are still some issues to be resolved in relation to the implementation of the above changes, particularly final changes to some clients' PSRs and the consequent adjustments to budgets and projections.

These changes have had a significant impact on information available to monitor the budgets. Projections have been calculated based on the distribution of clients across PSRs at a point in time. Similarly, the budgets were calculated based on the profile of clients across the new PSRs in April 2014. Both of these sets of information continue to require further work and, as such, the above projections should be viewed only in total, with the expectation that the pattern of overspend will shift between individual budget heads in future months.

The projected overspend of £1.8m arises from the full year effect of 2013/14 activity combined with projected new activity in 2014/15 and 2014/15 budget savings, including £1.45m saving from the capping of Adult Social Care costs (see section below for further details)

Adult Social Care

The overspend in Adult Social Care can be further analysed as follows:

	Projected	Previous	Change
	Variation	Variation	
	£'000	£'000	£'000
/ Memory & Cognition			
- Placements	1,238	1,313	-75
 Domiciliary Care / Direct Payments 	932	958	-26
- Placements	41	78	-37
- Domiciliary Care / Direct Payments	-179	-192	13
BCF contribution	-350	0	-350
	18	0	18
	1,700	2,157	-457
	 Domiciliary Care / Direct Payments Placements 	Variation £'000 <u>£' Memory & Cognition</u> - Placements - Domiciliary Care / Direct Payments - Placements - Domiciliary Care / Direct Payments - BCF contribution - BCF contribution - BCF contribution - Comparison - Com	Variation £'000Variation £'000- Placements1,2381,313- Domiciliary Care / Direct Payments932958- Placements4178- Domiciliary Care / Direct Payments-179-192- BCF contribution-3500180

The £1.45m saving from the capping of Adult Social Care costs was allocated across both placements (£1.031m, equivalent to 50 places) and domiciliary care/direct payments budgets (£0.419m) for the over 65's. Whilst placement numbers for the under 65's remain within the budget, those for the over 65's are currently showing 58 placements above budget, indicating that attempts to reduce numbers have not been successful. Since the last reported figures relating to September there has been a net reduction of 4 placements. Costs for domiciliary care and direct payments have reduced slightly, but a large overspend remains in this area.

The 2 invest to save schemes relating to Dementia (older people) and Physical Disability & Sensory Impairment have also not achieved the savings that were included in the budget, thus contributing to the overspend position. The dementia unacheivement totals £278k and PD £279k. Work continues in both these areas with a view to achieving these savings.

Commissioning

Learning Disabilities - Cr £350k

The projected spend has reduced from the previous report by £340k to a projected underspend position of £350k. This is due to a number of factors but has arisen mainly from contract efficiencies, limiting inflationary increases paid to providers, reduced future spend assumptions (potential placements being deferred / not materialising / at lower cost) and attrition.

The projections include a number of assumptions on increased client needs, carer breakdowns, remaining transition cases and the effect of Ordinary Residence transfers both in and out of Bromley. These assumptions have been reviewed in detail this cycle but there continues to be an element of forward projection in the reported figures; the position is likely to change between now and year-end.

Mental Health - Dr £431k (Dr £323k after planned management action savings)

Based on current client PSR classifications in Carefirst, an overspend of £431k is anticipated on Mental Health care packages. Once planned management action has been factored in this reduces to a projected overspend of £323k. However, there appears to be a significant degree of client misclassification for Mental Health and, until this is resolved, it is difficult to manage or monitor budgets effectively. Both budgets and projections are likely to change once PSR issues are resolved. Current data indicates that the net number of Mental Health placements is increasing each cycle and it has been assumed that this trend continues for the rest of the year.

2. Learning Disabilities Day and Short Breaks Service - Cr £150k

The learning disabilities short breaks service at Widmore Road has been running since 2013, when the 2 former respite units at Bromley Road and Tugmutton Close closed. The combining of the 2 facilities on to one new site has enabled staffing efficiencies to be made and a projected underspend of £150k is now reported as the service beds down on the new site.

3. Learning Disabilities Housing and Support - Cr £102k

Some minor restructuring of the service , including the deregistration of the residential units at St Blaise and Orchard Grove and changes around the management of the service have resulted in a current projected underspend of £102k.

4. Direct Care - Cr £38k

a) Extra Care Housing - Dr £236k

There is a significant pressure on the in-house ECH budgets, 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). There is no change to the figure reported in September. The main variations can be analysed as £296k overspend on staffing and £67k overachievement of income.

b) Transport Service- Cr £160k

Latest monitoring of the transport budget has identified a projected underspend of £160k, £36k in relation to staffing costs and £124k for transport related costs.

c) Reablement - Cr £120k

The underspend in this area relates to staffing, with increased vacancies in the service. As a result the team are carrying out less reablement of clients, which is likely to lead to increased costs within assessment and care management

d) Carelink - Dr £6k

There is a minor projected overspend in the service in relation to staffing.

5. Operational Housing - Dr £0k

As a result of the drawdown of £653k approved by Executive on 15th October 2014, no variation is currently projected for temporary accommodation budgets. The projection assumes continued growth of 15 clients per month combined with continuing rising unit costs. This increase has been noticeable across all London Boroughs and is the result of the pressures of rent and mortgage arrears coupled with a reduction in the numbers of properties available for temporary accommodation. There are high levels of competition and evidence of 'out bidding' between London boroughs to secure properties and this has contributed towards the high costs of nightly paid accommodation.

Although no variation is expected in-year, there is a projected full year effect pressure of £260k in 2015/16. However, this only takes account of projected activity to the end of March 2015 and does not include any projected further growth in numbers beyond that point.

There will be a further revenue contribution to Capital as part of the year end closing of accounts for 2014/15, due to increased costs (overspend) associated with the Bellegrove conversion of £49k. This, the £16k shortfall previously reported relating to the Manorfields conversion, and a projected £17k overspend on furniture storage will be offset by one off in-year underspends on various staffing budgets due to delays in the recruitment and appointment of staff as part of the restructure, plus a few minor underspends on running expenses.

	Pr	ojected
	v	ariation
		£'000
Staffing & running costs	Cr	82
Manorfields capital shortfall		16
Bellegrove capital overspend		49
Furniture storage		17
		0

6. Strategic and Business Support - Cr £254k

The projected underspend of £254k has arisen from a combination of: part year vacancies; underspends on running expenses (including staff advertising); significantly reduced levels of activity on training mainly as a result of delays in the delivery of Care Act training; projected net additional income from schools.

7. Children's Social Care - Dr £103k

The projected overspend in Children's Social Care has increased this month with the main areas of under / overspending being:

Placements - Cr £551k

The children's placement budget is currently projected to underspend by £551k, based on current numbers of children being looked after, plus an assumption for new children having to be looked after during the year. This is partly offset by increased costs of children leaving care, as reported below.

No Recourse to Public Funds - Dr £247k

The cost to Bromley for people with no recourse to public funding significantly exceeded the budget established for these costs in 2013-14. Additional budget was moved into this area for 2014/15, however the trend of increased costs is continuing during the current financial year, with a current projected overspend of £247k now being reported, a slight reduction from the last reported figure. The projection includes an assumption for new clients coming through the system for the remainder of the year.

Leaving Care Clients - 16/17 year olds - Dr £224k

Expenditure relating to leaving care services for 16 and 17 year olds is projected to overspend due to the numbers of children leaving care. This amount has increased slightly from the last reported figure of £200k. This could further increase if more children within this age group leave care requiring services.

Leaving Care Clients - 18 plus - Dr £155k

Expenditure relating to leaving care services for 18 year olds and over is projected to overspend as a result of delays relating to the reclaiming of housing benefits and the non recovery of some personal charges which will have to be written off. Officers are working together to ensure that all sums that should be recovered are recovered in a timely manor.

Children's Disability Service - Cr £76k

The current provision for the respite service agreement with Bromley CCG at Hollybank is expected to underspend by £45k this year. In addition costs relating to the Children's Disability team are expected to be £31k under budget.

Other miscellaneous budgets - Dr £104k

An SLA with an external provider was not renewed in 2013-14, resulting in a continuing underspend of £38k, staffing budgets across the division are projected to overspend by approximately £50k and legal costs of £91k have been incurred relating to care proceedings for which there is no budgetary provision.

8. Commissioning - Dr £34k

Although a relatively small total variation, the projected net overspend of £34k comprises:

		ojected
	variation	
		£'000
Taxicard	Cr	48
Contracts (net)	Cr	18
Carers	Cr	5
Commissioning staffing and related budgets	Cr	2
Deprivation of Liberty Safeguards		107
Projected net overspend		34

The underspend on Taxicard arises from a TfL and London Councils re-profiling exercise and lower than budgeted takeup in Bromley, resulting in a reduced charge. The projected underspends on contracts and Carers budgets largely arise from limiting inflationary increases to third party providers.

A recent Supreme Court judgement relating to Deprivation of Liberty Safeguards has potentially significant financial implications. The background was outlined in a report to the Executive on 10th June 2014. There is evidence of a significantly higher number of assessments than in previous years and it is anticipated that there will be an overspend of approx. £107k in 2014/15 (doctors' assessments and staffing). This is a net figure and the overspend has been offset, in part, by recurrent underlying underspends on the DoLS budget. There may be further additional costs this year and, once further details of the judgement and its consequences are available and further mapping work has been carried out, likely cost implications will become clearer and included in a future report.

9. Supporting People - Cr £146k

The projected underspend of £146k on Supporting People budgets arises from inflationary savings and the effect of retendering / extending contracts at a reduced cost. It should be noted that any savings arising from future re-tendering or contract extensions have not been assumed in this figure so the underspend may increase. There was a £270k saving built in to the 2014/15 budget and the £146k underspend is in excess of this.

10. Housing Improvement - Dr £23k

There is a projected shortfall within renovation grant agency fee income of £18k, and other income of £8k. This is due to reduced activity on capital schemes which has had a corresponding effect on the fees earned. There are other minor variations across of the service of Cr £3k, giving rise to the net deficit of £23k.

EARLY WARNINGS

Deprivation of Liberty Safeguards

A recent Supreme Court judgement relating to Deprivation of Liberty Safeguards and the deprivation of liberty of individuals has potentially significant financial implications. The background was outlined in a report to the Executive on 10th June 2014. There is evidence of a significantly higher number of assessments than in previous years and £107k has been included in the projected spend for this and other related costs. Once further details of the judgement and its consequences are available and further mapping work has been carried out, likely cost implications will become clearer and will be included in a future report.

Waiver of Financial Regulations:

The Council's Contract Procedure Rules state that where the value of a contract exceeds £50k and is to be exempt from the normal requirement to obtain competitive quotations, the Chief Officer has to obtain the agreement of the Director of Resources and Finance Director and (where over £100,000) approval of the Portfolio Holder, and report use of this exemption to Audit Sub-Committee bi-annually.

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

(a) There was 1 contract waiver agreed for the continuation of a current contract of less than \pounds 50k.

(b) There was 1 waiver agreed for a placement over $\pounds 50k$ 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.

Ap	pendix	(1c

2014/15 Latest Approved Budget £'000 5,779	2	ariation to 2014/15 Budget £'000	Potential Impact in 2015/16
Approved Budget £'000		2014/15 Budget £'000	
£'000		£'000	
5,779			
		0	The full year effect of the current projections for temporary accommodation anticipated to be a pressure of £260k in 2015/16. This includes the £653k draw down from contingency in 2014/15 for the impact of welfare reforms approved by Executive on 15th Oct 2014. However, this only takes account of projected activity to the end of March 2015, and 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.
48,264		1,759	The net overspend on adult care placements is forecast to produce a full year overspend of £3,117k, based on activity to $31/3/15$ only (i.e. doesn't include changes to activity levels in future years).
649	Cr	150	The underspend currently reported in 2014/15 is expected to continue into next year.
1,383	Cr	102	The underspend currently reported in 2014/15 is expected to continue into next year.
3,167		34	Based on current levels of activity relating to Deprivation of Liberty Safeguards a full year budget pressure of £125k is anticipated.
1,385		41	The overspend currently reported for 2014/15 is expected to continue into next year.
2,006	Cr	146	Based on current contracts a full year underspend of £189k is anticipated.
12,800	Cr	551	The full year effect of the current projection is calculated at a £271k underspend. Officers have continued to work towards increasing the number of in-house foster carers so that expensive external placements can be avoided.
382		247	The full year effect of clients who have no recourse to public funds and Bromley are having to pay for has been calculated at £180k 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.
		379	The full year effect of clients who have left care is currently calculated at £271k. This mainly relates to 16 and 17 year olds who are not able to claim housing benefits and the full cost of accommodation is payable by the council.
	649 1,383 3,167 1,385 2,006 12,800	1,385 2,006 Cr 12,800 Cr 382	649 Cr 150 1,383 Cr 102 3,167 34 1,385 41 2,006 Cr 146 12,800 Cr 551 382 247 382 247 4 379

LATEST APPROVED BUDGET 2014/15 Care Services Portfolio

BUDGET VARIATIONS			£'000
2014/15 Original Budget		1'	17,670
Local Reform and Community Voices - grant related expenditure 2014/15 - grant related expenditure 2014/15	- IMHA (Exec 2/4/14):	Cr	64 64
Local Reform and Community Voices - grant related expenditure 2014/15 - grant related expenditure 2014/15	- DOLS (Exec 10/6/14):	Cr	24 24
Adult Social Care Investment Proposa - expenditure - contribution from earmarked reserv	I - Demand Management (Exec 22/7/14) /e	Cr	250 250
New Grant - Staying Put Implementation - expenditure - income	on Grant	Cr	36 36
Carry Forwards:			
Social Care funding via the CCG und - expenditure - income Impact of Care Bill / Adult Social Car		Cr	449 449
- expenditure - income		Cr	249 249
Tackling Troubled Families - expenditure - income		Cr	764 764
Public Health Weight Management F - expenditure - income		Cr	98 98
Social Care Funding via the CCG un - expenditure - income		Cr	40 40
Welfare Reform Implementation Fun - expenditure - income Dublic Lise the 2000	aing	Cr	66 66
Public Health s256 - expenditure - income		Cr	44 44
Public Health Transition Funding - expenditure - income		Cr	42 42
Increase in insurance premiums			4
Provision for homelessness (impact of - Bed & Breakfast - Manorfields	recession/changes to welfare benefits)		653 547
Merit Awards			40
NHS funding transfer integration fundin NHS funding transfer integration fundin		Cr	992 992
Total Variations			1,244
2014/15 Latest Approved Budget		1'	18,914

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Agenda Item 7c

Report No. CS14119	London Borough of Bromley PART 1 - PUBLIC			
Decision Maker:	for Pre-Scrutiny	cy Development and S folio Holder for Decisi	•	
Date:	21 st January 2015			
Decision Type:	Non-Urgent	Non-Executive	Non-Key	
Title:	HEALTHWATCH BROMLEY - AWARD OF CONTRACT			
Contact Officer:	Wendy Norman, Strategic Manager, Procurement and Contract Compliance Tel: 020 8313 4212 E-mail: wendy.norman@bromley.gov.uk			
Chief Officer:	Terry Parkin, Executive Director of Education, Care and Health Services Tel: 020 313 4030 E-mail: wendy.norman@bromley.gov.uk			
Ward:	Boroughwide			

1. Reason for report

1.1 The Council was given a statutory duty to fund the Healthwatch function through the Health and Social Care Act 2012. Community Links Bromley was awarded a contract to deliver this function in 2013. Healthwatch Bromley is now operating independently of Community Links Bromley. This report considers future delivery options for this service and recommends awarding a 3 year contract to Healthwatch Bromley from 2015/16

2. RECOMMENDATION(S)

The Portfolio Holder is asked to agree

2.1 a waiver under Contract Procurement Rules 3.2(ii) and 13.1 to award a 3 year contract to Healthwatch Bromley from 1.4.2015 to 31.3.2018. The contract value will reduce over the life of the contract as set out below:

2015/16	£140,650
2016/17	£113,150
2017/18	£ 85,650
Total	£339,450

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: Estimated cost £140,650 in 2015/16
- 2. Ongoing costs: Recurring cost. Total contract value over 3 years £339,450 reducing on an annual basis as set out in 2.1
- 3. Budget head/performance centre: 813 3817 Commissioning
- 4. Total current budget for this head: £145,000
- 5. Source of funding: Local Reform and Community Voices Grant (part) and Revenue Support Grant

<u>Staff</u>

- 1. Number of staff (current and additional): n/a
- 2. If from existing staff resources, number of staff hours: .5FTE monitoring officer 35 hours pa.

<u>Legal</u>

- 1. Legal Requirement: Statutory requirement. Health and Social Care Act 2012
- 2. Call-in: Call-in is applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 300,000+ Any user of Health or Social Care Services in Bromley.

Ward Councillor Views

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

3. COMMENTARY

- 3.1 Under the Health and Social Act 2012 the Government created a statutory duty for Local Authorities to provide a Healthwatch function. Healthwatch Bromley provides a comprehensive public and patient engagement mechanism for Health and Social Services. Healthwatch provides citizens and communities with the opportunity to influence and challenge how health and social care services are provided within Bromley through a role on the Health and Wellbeing Board and formal networking and integration with existing governing health/social care bodies and community organisations.
- 3.2 Healthwatch Bromley provides evidence based intelligence concerning people's views and experiences with care and social services which influence the policy, planning, commissioning and delivery of publicly funded health and social care. The service also signposts the Bromley population to information with which they can make more informed choices about their healthcare and social care services. Healthwatch Bromley has established itself with commissioners and providers as a credible organisation that is able to actively ensure that patient voice and opinion is heard.
- 3.3 Community Links Bromley was awarded a contract to set up Healthwatch Bromley following a competitive procurement exercise. The contract was awarded from 1.4.13 for 1 year plus the option for a 1 year extension. The option to extend was exercised for 1.4.14 31.3.15. The contract value was £145,000.
- 3.4 Initially Healthwatch Bromley was set up as a project within Community Links, however the contract required Community Links to facilitate the development of Healthwatch Bromley into an independent organisation in accordance with statutory guidance. The authorisation to extend the contract for 2014-15 included agreement that the contract would transfer (be novated) from Community Links Bromley to Healthwatch Bromley during the extension period.
- 3.5 Officers are currently processing the novation of the contract to Healthwatch Bromley which has been incorporated as a charity and company limited by guarantee. The separation from Community Links potentially enables Healthwatch Bromley to secure the future of the organisation by accessing funding from additional funding streams while also recognising the Charity Commission's stance that statutory functions must be funded by statutory provision, rather than from the charitable purse.
- 3.6 Healthwatch funding originally came from 2 sources. The bulk of the funding (£90k) was the amount the Council made available to Bromley Link, the organisation which preceded Healthwatch Bromley. This sum was included within the Revenue Support Grant (RSG) and is no longer separately identified within overall RSG funding. The remainder comes from the Local Reform and Community Voices Grant (£55k) and was included to fund the new responsibility of signposting and information giving assigned to all Healthwatches. In 2015/16 this grant will cease and funding for Healthwatch will be transferred to a new Department of Health Revenue Grant. Although not yet finalised, provisional allocations indicate that funding will remain at 2014/15 levels and that the new Revenue Grant will not be ring-fenced. There remains a statutory obligation to provide this service.
- 3.7 The strategic objective of Healthwatch Bromley is to contribute to improvements in the quality of health and social care in the borough. The methods by which the organisation will achieve this are set out below:

- To enable people to share their views and concerns about their local health and social care services (from birth to death) and to help them to understand that their contribution will help build a picture of where services are doing well and where they can be improved.
- By using the Chair's seat on the Health and Wellbeing boards, to ensure that the views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared, such as the Joint Strategic Needs Assessment (JSNA) and the authorisation of the Clinical Commissioning Groups.
- To recommend investigation or special review of provider services, either via Local Healthwatch England, or directly to the Care Quality Commission (CQC)
- To provide people with information about choices available and what to do when things go wrong.
- To signpost people who need help in making complaints about the NHS to a professional Independent Advocacy Service
- To signpost all service users to information about health and care services and how to access them.
- To give authoritative, evidence based feedback to organisations responsible for commissioning or delivering local Health and Social Care services.
- Through its annual report, making the views and experiences of people known to Local Healthwatch England and providing a steer to help it carry out its role as national champion on behalf of the Secretary of State and of Parliament

Performance

- 3.8 Council Commissioners meet quarterly with Healthwatch Bromley in order to monitor progress against the contract. The organisation has progressed well and has built up a positive reputation within the borough. Quarterly reports are submitted to Commissioners giving a detailed breakdown of activities undertaken. The Annual Report set out the objectives and was able to report on information gathered from the public and changes that had been instigated as a result of Healthwatch Bromley highlighting problems.
- 3.9 Board Members of Healthwatch Bromley represent the organisation at key meetings, such as the Health and Wellbeing Board, Care Services PDS, Bromley Clinical Commissioning Group and the Kings College Hospital NHS Foundation Trust which runs the Princess Royal University Hospital. Officers contacted the senior officers of these meetings or organisations in order to gather their views on the effectiveness of Healthwatch Bromley in gathering information and contributing to the meetings.
- 3.10 Positive feedback has been received from
 - Director of Public Health in respect of Healthwatch Bromley's positive contribution to the Joint Strategic Needs Assessment.
 - Portfolio Holder for Care Services, particularly noting that that Healthwatch Bromley has built up a positive organisation which actively promotes its role widely across the borough.
 - Executive Director of Education, Care and Health Services, noting that Healthwatch Bromley has played and is playing a significant part in the development of integrated commissioning across SE London to the benefit of Bromley residents.
 - Chair of Health and Wellbeing Board

- Head of Corporate Affairs, NHS Bromley Clinical Commissioning Group,
- Healthwatch England, commended Healthwatch Bromley for good practice in ensuring that the organisation works with young people as well as adults.
- Head of Engagement and Patient Experience, King's College Hospital NHS Foundation Trust
- 3.11 One of Healthwatch's key roles is to undertake Enter and View visits of any establishments which are commissioned using public funds to deliver health and social care, including care homes, hospitals, GP surgeries, dental surgeries, pharmacies and optician's practices. A team of volunteers has been trained to undertake these visits and during 2014 has already visited several care homes in Bromley. Joint teams of volunteers from the South East London boroughs undertook enter and view visits of Emergency Departments and Maternity Services in several hospitals. All these visits were planned in response to concerns raised by service users. To date the establishments have responded positively to the recommendations arising from enter and view visits.

OPTIONS

- 3.12 As the contract comes to an end on 31.3.15 it is appropriate to consider a range of options for the future of Healthwatch Bromley. The Council has a statutory duty to provide a Healthwatch service in Bromley, but In the current financial climate it is prudent to consider whether it is necessary to fund the full range of activities at the current level.
- 3.13 Discussions with officers from Healthwatch Bromley have indicated that the organisation would not be able to achieve its plans to consolidate and develop if its funding was reduced. If this is unavoidable it could probably absorb a reduction in funding of up to 3% and continue to deliver the current level of core activity. This would deliver a saving of £4,350.
- 3.14 As the organisation is formally separating from Community Links it will be investigating whether best value is achieved by sharing accommodation and all other back office costs, or by moving out of Community House altogether.
- 3.15 Salaries for the 3 FTE staff account for the 67% of the budget. If the staffing level is reduced it will compromise the range of the organisation's activities, particularly in the engagement of hard to reach groups where the officers are particularly skilled. It will also compromise the organisation's ability to pursue other funding streams.
- 3.16 Council Officers have identified that the Healthwatch activity which may be duplicated in other areas is the signposting and information function. The Care Act 2014 has introduced more responsibilities for the Council in this area. It would be appropriate for a review of how this Healthwatch activity fits with the Council's plans and to streamline the effort, thus potentially releasing further savings in future years.
- 3.17 In recent discussions with other local authorities it emerged that although all Healthwatch contracts are ending in March 2015 only one of nineteen authorities was re-commissioning via a procurement process. The initial tendering process in 2012 revealed that there is a very limited number of alternative providers who may bid for a contract. The Council only received 2 bids in response to the original procurement exercise for this service, therefore Officers do not consider that there would be any financial or qualitative benefit to the Council to go to the market at this point.
- 3.18 Officers propose that the Council enters into a new 3 year contract with Healthwatch Bromley in which the value tapers after year 1, to recognise efficiencies to be made in the signposting function and the additional funding from undertaking independent projects that Healthwatch

Bromley can attract now that they are an independent organisation. Based on the current contract value without any inflation added the contract sums would be:

2015/16	£140,650	current value less 3%
2016/17	£113,150	current value less 50% signposting funding
2017/18	£ 85,650	Current value less 100% signposting funding.

3.19 The Healthwatch Board and Health and Social Care stakeholders alongside contract compliance officers will ensure that Healthwatch is enabled to focus on key core activities that deliver real outcomes for residents of Bromley. Future budget proposals will have an impact on the people of Bromley most in need of health and social care services. Healthwatch Bromley has an important role in ensuring the voices of local people are heard throughout the commissioning and decommissioning of services, and in ensuring the public are sign-posted to appropriate services, especially in times of major change to service provision.

4 POLICY IMPLICATIONS

4.1 Provision of a local Healthwatch function is a requirement introduced by the Health and Social Care Act 2012.

5 FINANCIAL IMPLICATIONS

5.1 Funding for Healthwatch provided through Revenue Support Grant is contained within the Council's overall grant settlement and is no longer separately identified nor ring-fenced. Further funding of £55k was included within the Local Reform and Community Voices Grant which will cease in 2015/16 and be replaced by a new Department of Health Revenue Grant. Provisional allocations indicate that the grant will not be ring-fenced and will remain at the same level as 2014/15 although this is yet to be finalised. The report identifies the statutory nature of the service although it is recognised that it is important to consider whether it is necessary to fund the full range of activities at the current level. The report proposes a reduction in the contract sum over a three year period.

6 LEGAL IMPLICATIONS

- 6.1 There is a Statutory obligation to provide this service. These proposals will satisfy that statutory duty.
- 6.2 Clauses 3.2.(ii) and 13.1 of the Contract Procedure Rules set out the allow for an exemption to tendering. "Chief Officer in agreement with Corporate Director of Resources and Finance Director and following Approval of the relevant Portfolio Holder, with a report of the use made of this exemption being made to Audit Sub committee on a bi-annual basis." This appears to be justification for this request.

Non-Applicable Sections:	Personnel Implications
Background Documents: (Access via Contact Officer)	CS12063 Award of Contract – Healthwatch Bromley ACS11063 Arrangements for developing Healthwatch in Bromley. CS12027 Development of Bromley Healthwatch and NHS Independent Complaints Advocacy Service. Healthwatch Bromley Annual Report 2013-14

Agenda Item 7d

Report No. FSD 14087

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker:	Care Services Policy Development and Scrutiny Committee			
Date:	21 January 2015			
Decision Type:	Non-Urgent	Executive	Кеу	
Title:	••••••••••	NON RESIDENTIAL C AYMENTS SCHEME	HARGING POLICY	
Contact Officer:	Lesley Moore, Deputy D , Tel: 020 8 313 4633 E	Director of Finance	nley.gov.uk	
Chief Officer:	Terry Parkin, Executive	Director Education & Care	Services	
Ward:	N/A			

1. <u>Reason for report</u>

1.1 To consider the impact on the Councils Charging Policy as a result of the Care Act 2014 and to outline the proposed changes to the Non-Residential Charging Policy and Deferred Payments Scheme.

2. RECOMMENDATION(S)

- 2.1 The Portfolio Holder is asked to
 - a) Agree the new charges as a result of the Care Act 2014 as set out in paragraph 3.3 to 3.6.1 for 2015/16 be approved.
 - b) Agree to engage with service users, their families and carers about the proposed new standard allowances for Disability Related Expenditure as set out in paragraph 3.7 to 3.7.5 of this report.

Corporate Policy

- 1. Policy Status: N/A.
- 2. BBB Priority: N/A.

<u>Financial</u>

- 1. Cost of proposal: No cost -
- 2. Ongoing costs: Recurring cost. £ 200k p.a. saving
- 3. Budget head/performance centre: Care Services Charging
- 4. Total current budget for this head: £ 3,898,000
- 5. Source of funding: Charging

<u>Staff</u>

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

<u>Legal</u>

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

Customer Impact

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

Ward Councillor Views

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

3. COMMENTARY

- 3.1 As part of the budget process officers always review income budgets to ensure that income is maximised or reflects changes that have occurred to services that ultimately impact on our charging policy.
- 3.2 This report considers the impact of the Care Act 2014 on the current Charging Policy and also explores income opportunities.

THE CARE ACT 2014

Universal Deferred Payments

- 3.3 The Council currently operates a deferred payment scheme in accordance with the Health and Social Care Act 2001.
- 3.3.1 The Care Act 2014 establishes a universal deferred payment scheme which means that from April 2015, local authorities are required to provide a deferred payment scheme for anyone who they assess as having eligible needs which should be met through a care home placement and whose capital (excluding the value of their property) is below £23,250.
- 3.3.2 Under Sections 34-36 of the Care Act 2014, local authorities must have a deferred payment scheme which:
 - Includes a set of national criteria governing eligibility
 - Allows some local discretion, for example on the amounts that can be deferred
 - Permits a local authority to charge interest and administrative fees to offset the costs of the scheme
- 3.3.3 The London Borough of Bromley's deferred payments policy has been designed to comply with the Care Act 2014 and the Department of Health's Care and Support Statutory Guidance. Its aim is to provide flexibility for when and how a person pays for their care and support by delaying the need to sell their home, during a time that can be challenging for them and their loved ones as they make the transition into care.

The principles underpinning the scheme are:

- To ensure that those who have been assessed as needing care may not need to sell their property to pay for care subject to meeting the criteria
- To ensure that residents are fully informed about deferred payments and eligibility
- That the scheme is self-financing and sustainable

Services covered by this policy

- 3.3.4 The Act gives local authorities discretion to enter into deferred payment agreements with people whose care and support is provided in supported living accommodation (e.g. Extra Care Housing).
- 3.3.5 It is not proposed that deferred payment agreements are extended to service users in Extra Care Housing because it could take years before the money is ever recovered by the Council. The proposal is that the Council's deferred payment policy will only cover residential and nursing care.

Obtaining Security

- 3.3.6 Under the Care Act 2014, a local authority must have adequate security in place when entering into a deferred payment agreement. The regulations state that a first legal mortgage charge must be accepted as adequate security, however it also provides wider discretion for local authorities to accept other forms of security as they see fit.
- 3.3.7 The proposal is the Council will consider other forms of security such as a second legal charge and each case will be considered on its own merits, whilst ensuring that the Council is not exposed to financial risk.

Administration fees and interest charges from 1 April 2015

- 3.3.8 Prior to the Care Act 2014, local authorities were **not allowed** to recover the administration costs of running a deferred payment scheme from service users. The Care Act now permits councils to run this scheme on a cost-neutral basis and charge for any administration costs incurred providing the deferred payment scheme.
- 3.3.9 It is therefore proposed that from April 2015 the following charges are introduced:-
 - Set up charge £750 (plus VAT)
 - Annual charge £300 (plus VAT)

• Termination Charge £325 (plus VAT)

- Independent valuation of property Actual cost
- 3.3.10 The Care Act **now** also permits the Council to charge interest on the deferred payment amount to cover the cost of lending and the risks associated with lending, for example the risk of default. However, local authorities are not permitted to charge interest at a rate higher than the nationally set maximum rate.
- 3.3.11 The national maximum interest rate will change every six months, on 1st January and 1st June to track the market gilts rate specified in the most recently published report by the Office of Budget Responsibility. This is currently published in the Economic and Fiscal Outlook, which is usually published twice-yearly alongside the Budget and Autumn Statement.
- 3.3.12 It is proposed that the Council charge the nationally set maximum interest rate for all deferred payment agreements. On the basis of the current gilt rate (2.5 per cent), the interest rate applicable from the scheme's inception on 1 April 2015 to 30 June 2015 will be 2.65 per cent.
- 3.3.13 The Department of Health will develop a tool to aid local authorities in assessing sustainability of a deferred payment however local authorities retain final responsibility and have discretion over decisions taken about the agreements they enter into.
- 3.3.14 The Care Act repeals all current legislation including the right to place a unilateral charge against someone's property. This means that any debt which the Council has secured with a charge under Section 22 of the Health and Social Security and Social Services Adjudications Act 1983 will not be permitted to accrue any further care fees from 1st April 2015. These cases will be reviewed prior to 31st March 2015 and a deferred payment agreement will be entered into where possible. There are currently 53 service users where a charge has been placed against their property.

3.3.15 The new policy is attached in Appendix 1

Current Contributions Policy for Non-Residential Care

- 3.4 Charges are currently calculated in line with the Fairer Charging Guidance 2013. The Care Act 2014 provides a single legal framework for charging for care and support under sections 14 and 17. The new framework is intended to make charging fairer and more clearly understood by everyone.
- 3.4.1 Under the new legislation local authorities still have a duty to meet the eligible needs of a person who has above the upper capital limit (currently £23,250) and has been assessed as requiring non-residential care. However local authorities **may now apply** an administration fee to cover its costs where they have been asked to arrange the persons care and support on their behalf.
- 3.4.2 The arrangement fee must not be higher than the cost the local authority has incurred in arranging that care and support. It is proposed that the arrangement fee from 1 April 2015 is £240.

Charging for Support to Carers

- 3.5 Where a Carer has eligible support needs of their own, and the local authority is meeting the needs of a Carer by providing a service directly to them, it **now** has the power to charge the carer. Where a local authority takes the decision to charge a Carer, it must do so in accordance with the non-residential charging rules.
- 3.5.1 The proposal is that carers will be charged the full cost for the service they receive subject to a financial assessment.

Backdated Charges

- 3.6 Under the current legislation local authorities can only charge for non-residential care services from the date the service user is notified of their charges. This will not be the date that the service commences as a financial assessment will need to be undertaken, which is usually about 5 days after the service commences.
- 3.6.1 There is no provision in the new legislation which states local authorities must inform the service user of their assessed charge before the charges can commence and the Department of Health has confirmed that it would expect the local authority to **backdate** any charges to when it started meeting the person's care and support needs.

OTHER PROPOSED CHANGES

Disability Related Expenditure (DRE)

3.7 In addition to the various allowances that are taken into account in assessing a service user's charge, people with specific expenses in excess of standard living costs may receive a further reduction in their charge for disability related expenses. These may include items such as laundry costs, fuel and heating costs or servicing and maintenance costs of specialist disability equipment.

- 3.7.1 Currently the Council gives the following standard DRE allowances:
 - £5.50 where the service user is receiving the low rate of disability living allowance (DLA).
 - £11.00 where the service user is receiving the middle rate of DLA, the standard rate of personal independence payment (PIP) or the low rate of attendance allowance (AA).
 - £16.48 where the service user is receiving the higher rate of DLA, AA or the enhanced rate of PIP.
- 3.7.2 Given the need to review all areas of the Council's budget over the next four years, it is proposed to revise the standard DRE allowances as follows:-
 - £5.50 where the service user is receiving the low or middle rate of disability living allowance (DLA), the standard rate of personal independence payment (PIP), or the low rate of attendance allowance (AA).
 - £11.00 where the service user is receiving the higher rate of DLA, the enhanced rate of PIP or the higher rate of AA.

If the new proposal moving from 3 standard rates to 2 standard rates for DRE is agreed, there will be £200k p.a. additional income generated in a full year.

- 3.7.3 Currently there are 1,766 service users who receive a DRE allowance, of which approximately 1,000 will be affected by up to £5.50 a week. Service users who have disability related expenses above the standard allowance can receive an individual assessment by submitting an appeal and evidence of their expenses.
- 3.7.4 It is proposed to engage with service users, their families and key organisations in Bromley on the change to DRE allowances commencing from the publication of this report. The period of engagement will be for 4 weeks commencing on the 29th January and ending on the 25 February 2015. It is anticipated that, subject to any changes being made as a result of the responses received, the new standard rates will be implemented for the commencement of the 2015/16 financial year.
- 3.7.5 In 2013/14 we received 58 appeals which resulted in a reduction in charges of £700 a week.

Equalities Impact Assessment

- 3.8 An initial equality impact assessment is being undertaken to assess the impact of the policy changes on current service users this will be available at the consultation web page <u>http://bromley.mylifeportal.co.uk/consultations</u>
- 3.8.1 A follow up assessment will be undertaken during the implementation phase to reassess the impact. This will include contributions from a range of stakeholders to ensure that issues and risks are identified and actions are put in place to minimise.

4. POLICY IMPLICATIONS

4.1 These proposals impact on the Council's Building a Better Bromley aim of promoting independence by ensuring that resources are available to meet increasing demand from an increasing elderly population and adults with disabilities and care needs.

5. FINANCIAL CONSIDERATIONS

- 5.1 All service users will have a means tested assessment of their finances under the Care and Support Statutory Guidance. The calculation of the assessment will show how much the service user can reasonably afford to contribute toward the cost of their care (the client contribution).
- 5.2 The proposed new charges as a result of the Care Act 2014 have all been assumed in the paper to the Care Services PDS Committee 2 October 2014. If these are not agreed then the net cost of the Care Act on the Councils bottom line will increase by £15k p.a.
- 5.3 The proposed changes to DRE will generate additional income of £200k p.a. in a full year

6. LEGAL CONSIDERATIONS

6.1 The changes in the law have been set out under Policy Implications.

Non-Applicable Sections:	Personnel
Background Documents: (Access via Contact Officer)	Files held in Finance & Exchequer Teams

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Appendix 1

LONDON BOROUGH OF BROMLEY

Education, Care and Health Services

Deferred Payment Policy April 2015

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London Borough of Bromley Deferred Payments Scheme

1. LEGAL BASIS

- 1.1 The Care Act 2014 established a universal deferred payment scheme which means that from April 2015 people may not need to sell their home in their lifetime to pay for their care. A deferred payment is a way of deferring the costs of care which have to be repaid at a later date. The Care and Support (Deferred Payment) Regulations 2014 sets out the legal framework and local authorities' responsibilities in greater detail.
- 1.2 From April 2015, local authorities are required to provide a deferred payment scheme for anyone who they assess as having eligible needs which should be met through a care home placement and whose capital (excluding the value of their property) is below £23,250.
- 1.3 Under Sections 34-36 of the Care Act 2014, local authorities will have a deferred payment scheme which:
 - Includes a set of national criteria governing eligibility
 - Allows some local discretion, for example on the amounts that can be deferred
 - Permits a local authority to charge interest and administrative fees to offset the costs of the scheme

2. POLICY AIMS

2.1 The London Borough of Bromley's deferred payments policy has been designed to comply with the Care Act 2014 and the Department of Health's Care and Support Statutory Guidance. Its aim is to provide flexibility for when and how a person pays for their care and support by delaying the need to sell their home, during a time that can be challenging for them and their loved ones as they make the transition into care.

3. SERVICES COVERED BY THIS POLICY

3.1 Residential and Nursing Care

Anyone whose needs are to be met by the provision of care in a care home. This is determined when the council has assessed the person as having eligible needs which should be met through a care home placement.

4. KEY PRINCIPLES

- 4.1 The principles underpinning the scheme are:
 - To ensure that those who have been assessed as needing care may not need to sell their property to pay for care subject to meeting the criteria set out in section 7 below
 - To ensure that residents are fully informed about deferred payments and eligibility
 - That the scheme is self-financing and sustainable

5. INFORMATION AND ADVICE

- 5.1 The Council will provide information and advice about deferred payments during the care and financial assessment process as well as during the 12 week property disregard period.
- 5.2 Information will also be provided throughout the course of the agreement, and upon termination of the agreement.
- 5.3 Information will be provided in a way which is clear and easy to understand through a variety of channels; for example, the Council's website, leaflets, face to face contact.
- 5.4 The Council will facilitate access to independent financial information and advice.

6. THE 12 WEEK PROPERTY DISREGARD

- 6.1 Where a person has been assessed by the Council as having eligible needs which should be met through a care home placement and owns a property, the property will be disregarded for 12 weeks from the day they first enter the care home as a permanent resident. The resident will also be entitled to a 12 week property disregard property if a qualifying relative dies or moves into a care home.
- 6.2 After 12 weeks, unless there is statutory disregard of the property, the property is taken into account as a capital resource. A statutory disregard will apply where, for example, the property is occupied by a spouse, partner, or close relative who is incapacitated or aged 60 or over.

7. FINANCIAL ASSESSMENT OF CONTRIBUTIONS

7.1 Applicants entitled to a deferred payment will be assessed to make a financial contribution towards the costs of care from their assessable income and capital. The assessed contribution will be in accordance

with the Department of Health's guidance on financial assessments and charging.

7.2 The service user will be required to pay the assessed contribution during the 12 week property disregard and through the course of the deferred payment agreement.

8. ELIGIBILITY CRITERIA

- 8.1 The Council will offer a deferred payment where the service user meets the following criteria:
 - i. has been assessed as having eligible care needs which are to be met through residential/nursing care (whether this has been arranged by the Council or has been arranged and paid for by the individual);
 - has less than (or equal to) £23,250 in assets excluding the value of their home (i.e. in savings and other non-housing assets); and
 - iii. their home has not been disregarded as explained in section 6.2.
 - iv. they are able to provide adequate security (see section 11 entitled **Obtaining Security** below).
- 8.2 The Council may refuse an application for a deferred payment in the following circumstances:
 - i. where the Council is unable to secure a first charge on the service user's property;
 - ii. where the service user's property is uninsurable;
 - iii. where the service user wants to defer more than they can provide adequate security for (see also section 10 - **How much can be deferred**)
 - iv. where the service user wishes to include a top up in the deferred amount. In this situation, the Council may still choose to offer a deferred payment agreement but will be guided by principles in the section 10 – How much can be deferred to determine a maximum amount that is sustainable (or reflects the core care costs without any top-ups) and agree a deferral. The service user can then choose whether they wish to agree.
- 8.3 The Council will refuse an application for a deferred payment where the service user (or their representative) does not agree to the terms and conditions of the agreement.

8.4 Where the service user lacks mental capacity to enter into a deferred payment agreement then the person entering into the agreement must be legally appointed to manage their finances, for example Deputyship or Lasting Power of Attorney.

9. ASSESSMENT OF APPLICATIONS

- 9.1 All applicants for a deferred payment must complete the Council's designated application form disclosing full information about their circumstances and finances, as set out in the form.
- 9.2 When assessing applications for a deferred payment the Council will have regard to the sustainability of the deferred payment. This will include an assessment of the following:-
 - The likely duration of the deferred payment
 - Equity available in the property
 - Contributions which may be made from the service user's savings
 - Contributions which may be made from any rental income
 - Contributions which may be made from a third party
 - The period of time the service user would be able to defer weekly care costs

10. HOW MUCH CAN BE DEFERRED

- 10.1 The Council will defer actual care costs; the amount will be determined in accordance with statutory guidance, this would normally include the actual cost of care less any financially assessed contribution.
- 10.2 Where the service user wishes to include a third party top up the Council will consider whether the amount or size of the deferral requested is sustainable given the equity available from their property.
- 10.3 The following elements will dictate how can be deferred:
 - a) The amount of *equity the* service user has available in their property;
 - b) The amount the service user is *contributing to their care costs from other sources*, including income and (where they choose to) any contribution from savings, a financial product or a third-party; and

- c) The total *care costs* the service user will face, including any top-ups they wish to include.
- 10.4 When considering the equity available the Council will be guided by an 'equity limit' for the total amount that can be deferred and ensure that the amount deferred does not rise above this limit.
- 10.5 The equity limit is set at the value of the property minus ten percent, minus £14,250 (for financial year 2015/16, this is in line with the lower capital limit) and the amount of encumbrance secured on it.
- 10.6 This equity limit will leave some equity remaining in the property and will act as a buffer to cover any subsequent interest which continues to accrue, and will provide a small 'cushion' in case of small variations in the value of the property.
- 10.7 Where the deferred amount is approaching 70% of the value of the service user's property the Council will review the deferred payment agreement with the service user or their representative and consider whether a deferred payment agreement continues to be the best way to meet the care costs. The implications for any top-up that may be included in the deferral amount will be discussed.
- 10.8 The Council will not allow additional amounts to be deferred beyond the equity limit. However, interest can still accrue beyond this point, and administrative charges can still be deferred.
- 10.9 The Council may also refuse to defer any more care costs in the following circumstances:
 - a) when the service user's total assets fall below the level of the means-test and becomes eligible for local authority support in paying for their care;
 - b) where the service user no longer has need for care in a care home ;
 - c) if the service user breaches predefined terms of the agreement and the Council's attempts to resolve the breach are unsuccessful;
- 10.10 The Council will give a minimum of 30 days' notice that further deferrals will cease; and will provide an indication of how their care costs will need to be met in future. This could include:
 - a) receiving local authority support in meeting the care costs, or
 - b) meeting the costs from the service user's income and assets.

11. OBTAINING SECURITY

11.1 The Council must have adequate security in place when entering into a deferred payment agreement such as a first legal mortgage charge against the service user's property on the Land Register.

The Council will consider other forms of security such as a second legal charge or a solicitor's undertaking in the case of a short term loan. Each case will be considered on its own merits.

- 11.2 In cases of jointly owned properties the Council will require all of the owners' agreement to the charge being registered against the property. All owners will need to be signatories to the charge agreement, will need to agree not to object to the sale of the property for the purpose of repaying the debt due to the Council.
- 11.3 The Council will also require similar consent to a charge being created against the property from any other person who has a beneficial interest in the property.

12. ADMINISTRATION FEES AND INTEREST CHARGES EFFECTIVE FROM 1 APRIL 2015

Administration Fees

12.1 The deferred payment agreement scheme is intended to be run on a cost-neutral basis. The Care Act permits the Council to charge administration charges that reflect the actual costs of providing the deferred payment. The current charges are listed below:

Set up charge	£750 (plus VAT)
Annual charge	£300 (plus VAT)
Termination charge	£325 (plus VAT)
Independent valuation	Actual cost

Interest Charges

- 12.2 The Care Act also permits the Council to charge interest on the deferred payment amount to cover the cost of lending and the risks associated with lending, for example the risk of default .
- 12.3 The Council will charge the nationally set maximum interest rate for all deferred payment agreements. The service user will be informed of the current interest rate prior to entering into the deferred payment agreement.

- 12.4 The national maximum interest rate will change every six months on 1st January and 1st June to track the market gilts rate specified in the most recently published report by the Office of Budget Responsibility. This is currently published in the Economic and Fiscal Outlook, which is usually published twice-yearly alongside the Budget and Autumn Statement.
- 12.5 The interest charged and added to the deferred amount will accrue on a compound basis (i.e. the interest charged is added to the deferred amount so that the added interest also earns interest).
- 12.6 The compounding frequency will be in line with the how the Council pays its providers. This is currently four weekly.
- 12.7 Interest will continue to accrue on the amount deferred after the service user has reached the 'equity limit'. It can also accrue after the service user has died up until the point at which the deferred amount is repaid to the Council. If the Council cannot recover the debt and seeks to pursue this through the County Court system, the higher County Court rate of interest will be charged.
- 12.8 All charges will be clearly set out within the deferred payment agreement and the statement of deferred debt.
- 12.9 Administration charges and interest can be added on to the total amount deferred as they are accrued, although the service user may request to pay these separately.

13. PROPERTY VALUATION

- 13.1 Under the deferred payment scheme the Council will request two estate agent valuations of the property against which payments will be deferred. Where there is a substantially differing value the Council will obtain an independent valuation of the property The person applying for the deferred payment can also request an independent valuation of the property.
- 13.2 The cost of valuation(s) will be paid for by the service user or their representative.
- 13.3 The value of the property will be periodically reviewed during the lifetime of the deferred payment agreement to ensure that the equity limit is not exceeded and in any other circumstance where the value of the property will affect the sustainability of the deferred payment agreement.
- 13.4 Where the parties are unable to agree an appropriate valuation such disputes will be dealt with under the appeals procedure, see section 18 **Appeals Procedure.**

14. THE DEFERRED PAYMENT AGREEMENT

- 14.1 The Council will aim to have the agreement finalised and in place by the end of the 12-week disregard period (where applicable).
- 14.2 The Agreement will set out the following:
 - a) the fees that will be charged including the current interest rate and how interest will be calculated
 - b) how the agreement can be terminated
 - c) circumstances in which the Council may refuse to pay defer further care fees
 - d) details of the form of security
 - e) the requirement for the Council to provide a written statement every six months and within 28 days of request, setting out how much the service user owes to the Council and the cost to them of repaying the debt;
 - f) an explanation of equity limit, the maximum amount which may be deferred and the scope for this to change upon revaluation of the security;
 - g) the requirement for the Council to give 30 days' written notice of the date on which the deferred amount is likely to reach the equity limit;
 - h) the requirement for the service user to obtain the Council's consent for any person to occupy the property; and
 - i) details of how problems should be resolved if either party feels the terms of the agreement have been broken
- 14.3 The agreement will also stipulate:
 - a) the service user's responsibilities regarding maintenance and insurance of their home;
 - b) the service user's responsibility to notify the local authority of any change to their income, home or care and support;
 - c) the service user's responsibility to notify the Council if they intend to rent or sell their property and if someone has gained or may gain a beneficial interest in their property;
 - a clear explanation of the consequences of taking out a deferred payment agreement;

- e) the process for varying any part of the agreement; and
- f) the process by which the Council can require a re-valuation of the service user's property.
- 14.4 If the agreement is for a short term loan, it will contain:
 - a) a term confirming that the Council will make advances of the loan to the service user in instalments;
 - b) a term confirming that the purpose of the loan is to pay for costs of care and support in a care home, including –
 - details of the consequences of any failure by the service user to pay those costs of care and support; and
 - that the service user must inform the Council if he or she no longer receives or intends to receive care in such accommodation.
- 14.5 The service user or their representative will be required to sign or clearly affirm that they have received adequate information on options for paying the care fees, that they understand how the deferred payment agreement works and understand the agreement they are entering into; and that they have had the opportunity to ask questions about the contract.
- 14.6 The Council's deferred payment agreement (where the deferred amount is secured against the former home or other land) is not regulated by the Consumer Credit Act 1974. However it is subject to the Unfair Terms in Consumer Contracts Regulations 1999, and the Consumer Protection from Unfair Trading Regulations 2008.
- 14.7 The Agreement shall only take effect upon the applicant's or duly appointed representative signing the Agreement. A certified copy of the appointment of an Attorney or order from the Court of Protection appointing a Deputy will be accepted as evidence of authorisation to sign on behalf of the applicant.

15. REVIEWS AND DEFERRED PAYMENT STATEMENTS

- 15.1 A reassessment of the service user's client contribution will be carried out each year and the service user will be notified of the revised weekly amount they will be required to pay, the amount of any third party top up and the amount that will be deferred.
- 15.2 The service user will be required to provide the Council with evidence that the property has been adequately insured on an annual basis.
- 15.3 In addition to the annual reassessment the Council will issue a six monthly statement to the service user and/or their representative. The

statement will set out: the amount of fees deferred; interest and administrative charges to date; total amount due and equity available in the property. The statement will record the amounts deferred and progress towards the equity limit. (This statement will also be provided on request).

- 15.4 The security will be revalued when the amount deferred equals or exceeds 50% of the value of the security to assess any potential change in the value (and consequently the person's 'equity limit' should be reassessed in turn). After this revaluation, the Council will should revalue the security periodically to monitor any potential further changes in value.
- 15.5 If there has been any substantial change in the value of the security the Council will also review the amount being deferred, as set out in section 10 **How much can be deferred.**

16. TERMINATING THE DEFERRED PAYMENT AGREEMENT

- 16.1 The deferred payment agreement can be terminated in the following three ways:
 - a) at any time by the service user, or their representative, by repaying the full amount due;
 - b) when the property is sold and the authority is repaid; or
 - c) when the service user dies and the amount is repaid to the Council from their estate.
- 16.2 Where the Agreement is voluntarily terminated the Council will require written notice of termination.
- 16.3 If the property is being sold the Council must be notified during the sale process and the amount due to the Council must be paid from the proceeds of the sale.
- 16.4 The deferred payment will automatically come to an end on the service user's death. The debt can either be paid from the estate or by a third party, for example a family member may choose to settle the debt rather than sell the deceased's property. The total amount due becomes payable within 90 days after the date of death.
- 16.5 The executor of the will is responsible for arranging for repayment of the amount due (in the case of payment from the estate).
- 16.6 Interest will continue to accrue on the amount owed to the Council after the service user's death and until the amount due to the Council has been repaid in full.

- 16.7 If after this 90 day period referred to in 16.4, the Council concludes that active steps to repay the debt are not being taken, for example if the sale is not progressing and the Council has actively sought to resolve the situation (or the Council concludes the executor is wilfully obstructing sale of the property), the Council will enter into legal proceedings to reclaim the amount due to it.
- 16.8 In whichever circumstance an agreement is terminated, the Council will provide a full breakdown of how the amount due has been calculated and the full amount due must be repaid to cover all costs accrued under the agreement.
- 16.9 Once the amount has been paid, the Council will provide confirmation that the agreement has been concluded, and confirm that the charge against the property has been removed.

17. SHORT TERM LOANS

- 17.1 Where the Council has made the decision to refuse an application for a deferred payment it may still be possible for the service user to receive short-term financial help while their home is being sold.
- 17.2 All applicants for a short term loan must complete the Council's designated application form disclosing full information about their circumstances and finances, as set out in the form.
- 17.3 The service user should have already arranged for the property to be put up for sale to establish that they have a genuine intention to sell the property to fund their care costs.
- 17.4 The Council will require:
 - i. a copy of the contract from the estate agent/s which confirms the instruction to act for the vendor to sell the property,
 - ii. a solicitor's undertaking which confirms that the proceeds of the sale will be used to settle the outstanding debt to the London Borough of Bromley for care home fees.
- 17.5 If the application is successful the Council will fund the shortfall between the service user's contribution and the actual cost (excluding any third party top up) for a period not exceeding three months from the end of the twelve week property disregard period.
- 17.6 Where there is a third party top up, the third party will continue to be responsible for payment of the third party contribution while the property is being sold.
- 17.7 If the property is not sold within the three month period, the service user or financial representative should submit a written request to the

Council for an extension of the short-term loan supported by the solicitor's undertaking. Extensions will be considered on an individual basis.

18. **REFUSING AN APPLICATION**

18.1 The Council can refuse a request for deferred payment or short term loan. In such circumstances the decision will be notified in writing to the service user and/or their representative. The decision will set out the grounds for refusal and provide information on how to appeal. Reasons for refusing a deferred payment are set out in section 8 **Eligibility Criteria**.

19. APPEALS PROCEDURE

- 19.1 A service user may appeal against a decision to refuse a deferred payment or short term loan.
- 19.2 Disputes about the valuation of the service user's property will also be dealt with as part of the appeals process.
- 19.3 Appeals should be made within 20 working days of being notified of the outcome of the application for a deferred payment agreement or short term loan. This period can be extended if there are exceptional circumstances.
- 19.4 The appeal will be considered by the Director of Finance (or his delegated representative) and the appropriate Head of Service within Education, Care and Health Services.
- 19.5 If the service user is dissatisfied with the outcome of the appeal they can request that this matter is dealt with under Council's Adults Social Care Complaints procedure.

Appendix 1



solicitor):

APPLICATION FOR A DEFERRED PAYMENT

Please complete the form in black ink, using BLOCK CAPITALS throughout.

Please refer to the guidance notes when completing this application.

SECTION 1: DETAILS OF PERSON APPLYING FOR THE DEFERRED PAYMENT

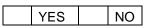
1. Mr/Mrs/Ms/other:Surname:
First names
Date of birth/
Phone number where you can be contacted
Mobile number
Email address

SECTION 2: DETAILS OF REPRESENTATIVE OF PERSON APPLYING FOR THE DEFERRED PAYMENT (IF RELEVANT) [please refer to note 1]

2. Mr/Mrs/Ms/other:Surname:
First names:
Post code
Telephone:
Mobile number
Email address
3. Relationship to person named in Section 1 (for example, son, daughter,

.....

4. Do you have legal authority to act on behalf of the person named in Section 1?



5. If **YES**, please tick the relevant box and submit copies of the relevant documents

Enduring/ Lasting power of attorney	Deputy
-------------------------------------	--------

6. Please tick which of the following you have authority to deal with

		property	bank accounts	investments	savings
--	--	----------	---------------	-------------	---------



other (please state)

If you are in the process of applying for legal authority, please provide evidence of the application to the Court (e.g. a copy of the Court's acknowledgement of your application) with your completed application form.

SECTION 3: DETAILS OF YOUR CARE

.....

7. Name of care home:

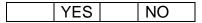
Address: Post Code

8. The date that you started living in the above care home on a permanent basis: [Please see note 2]

9. How was your placement made?Privately/by this Council/ by another Council / Other (please state)

.....

10. Did you apply for the 12 week property disregard? [please see note 3]



11. If **YES**, please give the dates of this disregard:

Start of disregard end of disregard

12. What is the total weekly cost of your accommodation and care?

£..... per week

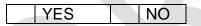
13. If you are receiving nursing care, does this fee include the funded nursing care (FNC) payment? (The FNC is paid by your Clinical Commissioning Group if you require certain nursing assistance at your care home)

YES	NO	
-----	----	--

14. Is a top-up being paid? [please see note 4]



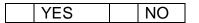
15. If **Yes**, do you wish to include these payments in your deferred payments loan?



16. Would you consider retaining a lower disposable income allowance (DIA) where the Council has considered your application and is unable to offer a deferred payment agreement because the deferral amount means it would not be sustainable. [please see note 5]



17. Is your property currently being rented?



18. If **Yes**, what % of the net rental income do you wish to retain? **[please** see note 5]

.....%

SECTION 4: DETAILS OF PROPERTY OFFERED AS SECURITY

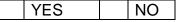
19. Address:

.....

.....

.....Post code

20. Do you own the property specified above?



21. If **YES**, please tick the relevant box

I am the sole owner I own it with other(s)

22. Please give details (for example jointly owned, tenancy in common) and give the name(s) and address of the other owner(s) as detailed on the property deeds.

PLEASE NOTE THAT THE COUNCIL WILL NOT APPROVE A DEFERRED PAYMENT APPLICATION UNLESS ALL JOINT OWNERS OF THE ABOVE PROPERTY PROVIDE WRITTEN CONSENT OF THEIR ACCEPTANCE OF A LEGAL CHARGE BEING PLACED ON THE PROPERTY WITH THIS FORM.

23. What type of property is it? Please tick the relevant box

flat		bungalow		terraced house	semi-detached house
detached house			Othe (plea	r ase specify)	

24. Does anyone reside in the property?

YES	NO
-----	----

25. If **YES**, please provide details

Name Age Relationship to you

27. Is your home mortgaged?

YES	NO

28. If **YES**, please provide the following details:

 Name of mortgage lender:

 Account no:

 Date of mortgage agreement:

Amount of outstanding mortgage:

SECTION 5: DECLARATION

- I wish to make an application under the London Borough of Bromley's Deferred Payment scheme.
- I understand that acceptance of any application under this scheme is subject to the criteria set out in the London Borough of Bromley's Deferred Payment Policy and that the deferred payments will not take effect until a formal agreement has been entered into.
- I confirm that I own/ part-own (delete as appropriate) the property specified in Section 4. I authorise the London Borough of Bromley to check legal title to this property.
- I agree to a legal charge being placed on the property specified in section 4. I agree to pay the fee for this charge. I have enclosed written consent from all joint owners accepting the legal charge being placed on the property.
- I agree that I am responsible /(Name of person signing in section 2 on behalf of applicant / delete as appropriate) for payment of the applicant's weekly assessed contribution due from their income and capital assessed under the Care Act 2014, the Care and Support Statutory Guidance 2014, The Care and Support (Charging and Assessment of Resources) Regulations 2014 and The Care and Support (Deferred Payments) Regulations 2014
- I confirm that I and all other persons who occupy or have a beneficial interest in the property specified in section 4 have been made aware of this application, that they have provided written consent to the legal charge on the property and they have been advised to seek their own

independent legal and financial advice before I enter into an agreement under the London Borough of Bromley's Deferred Payment scheme.

• I have /have not (please delete as appropriate) authorised a solicitor to act on my behalf:

Name and address of Solicitor:

.....

- I confirm that all of the information given on this form is true and accurate to the best of my knowledge
- I have read and understood and accept the terms and conditions of this application for a Deferred Payment from the London Borough of Bromley.
- I understand that the London Borough of Bromley will store the information provided on this form on paper and on computer. I agree that when necessary this information may be shared with other organisations that work with the London Borough of Bromley. I understand that the information will be kept secure and confidential and that I can request to see information held at any time in accordance with the Data Protection Act 1998.
- The offer to defer payments is subject to the criteria set out in the London Borough of Bromley's Deferred Payment Policy and if the application is declined, the London Borough of Bromley will write to you or your agent declared in section 2, in order to inform you of the reason for its decision.

Signed
Name
Date
Signed on behalf of
Authority held

If you are signing on behalf of the person applying for a deferred payment in section 1, you must be the person named in Section 2 and have legal authority to act on their behalf. A certified copy of this legal authority should be attached to this application form.

GUIDANCE NOTES

Note 1

You can only sign this form on behalf of your relative, friend or client if you hold the appropriate legal authority to act on their behalf. A copy of this authority should be submitted with this application.

If you do not have legal authority or if you are in the process of applying for it, you can fill in the details on the form, but the person applying for the deferred payment scheme *must* sign the form themselves.

If the applicant lacks capacity and the person named in Section 2 does not have legal authority to act on their behalf, you can still complete this form however you will not be able to enter into a deferred payment agreement until you have obtained legal authority to act on behalf of the applicant.

You will need to provide evidence of your application to the Court of Protection (e.g. a copy of the Court's acknowledgement of your application) and a certified copy of the legal authority to act for the applicant, once you have received it.

Note 2

The date that you give here should be the date your residence became permanent. (If you entered the home on a temporary basis, you should give the date of the Council's decision that you have eligible care needs which are to be met through residential/nursing care or supported living.

Note 3

If you meet the criteria for a 12 week property disregard the value of your property will be disregarded in your financial assessment for the first 12 weeks of your permanent placement. You will also be entitled to a 12 week property disregard if a qualifying relative dies or moves into a care home.

Your assessed weekly contribution will be based on your income and capital only. (*Please note all service users in permanent residential care are still required to pay the assessed contribution during the 12 week property disregard period*).

Note 4

The contribution that the Council pays towards a service user's residential care is based on the personal budget which the cost to the local authority of meeting the person's eligible needs.

In some cases, a person may actively choose a setting that is more expensive than the amount identified for the provision of the accommodation in the personal budget. Where they have chosen a setting that costs more than this, an arrangement will need to be made as to how the difference will be met. This is known as an additional cost or 'top-up' payment and is the difference between the amount specified in the personal budget and the actual cost.

You should not agree to enter into a "top-up" agreement with a care home without seeking written approval from the Council if you are applying for a deferred payment.

Note 5

You are entitled to retain up to £144 per week of your income (the 'disposable income allowance') when you enter into a deferred payment agreement however you can choose to keep less of your income than the disposable income allowance and reduce the amount you are deferring (thereby accruing less debt and paying less interest).

If you are renting out your property (or you decide to do so during the course of the deferred payment agreement) you are entitled to retain a percentage of any rental income you receive. You can choose not to retain any of the rental income in order to reduce the amount you are deferring.

Note 6

The completed form and all documents required should be sent to:

The Financial Assessment and Management Team Liberata UK Ltd 3rd Floor North Block Civic Centre Stockwell Close Bromley BR1 3UH

More information about meeting your costs of residential care is provided in the Council's "Paying for your Care Home Guide" available at www.bromley.gov.uk

Appendix 2



APPLICATION FOR A SHORT TERM LOAN

Please complete the form in black ink, using BLOCK CAPITALS throughout.

Please refer to the guidance notes when completing this application.

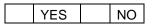
SECTION 1: DETAILS OF PERSON APPLYING FOR THE SHORT TERM LOAN

1. Mr/Mrs/Ms/other:Surname:
First names
Date of birth//
Phone number where you can be contacted
Mobile number
Email address

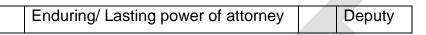
SECTION 2: DETAILS OF REPRESENTATIVE OF PERSON APPLYING FOR THE SHORT TEREM LOAN (IF RELEVANT) [please refer to note 1]

2. Mr/Mrs/Ms/other:Surname:
First names:
First names:
Address:
Post code
Telephone:
Mobile number
Email address

- 3. Relationship to person named in Section 1 (for example, son, daughter, solicitor):
-
- 4. Do you have legal authority to act on behalf of the person named in Section 1?



5. If **YES**, please tick the relevant box and submit copies of the relevant documents



6. Please tick which of the following you have authority to deal with

		property		bank accounts		investments		savings
--	--	----------	--	---------------	--	-------------	--	---------

other (please state)

If you are in the process of applying for legal authority, please provide

evidence of the application to the Court (e.g. a copy of the Court's acknowledgement of your application) with your completed application form.

SECTION 3: DETAILS OF YOUR CARE

7. Name of care home:

Address: Post Code

8. The date that you started living in the above care home on a permanent basis: [Please see note 2]

How was your placement made?
 Privately/by this Council/ by another Council / Other (please state)

.....

10. Did you apply for the 12 week property disregard? [please see note 3]

YES NO

11. If **YES**, please give the dates of this disregard:

Start of disregard end of disregard

12. What is the total weekly cost of your accommodation and care?

£..... per week

13. If you are receiving nursing care, does this fee include the funded nursing care (FNC) payment? (The FNC is paid by your Clinical Commissioning Group if you require certain nursing assistance at your care home)

YES	O
-----	---

14. Is a top-up being paid? [please see note 4]



SECTION 4: DETAILS OF PROPERTY BEING SOLD

15. Address:

.....

.....Post code

16. Do you own the property specified above?

YES NO

17. If **YES**, please tick the relevant box

I am the sole owner I own it with other(s)

18. Please give details (for example jointly owned, tenancy in common) and give the name(s)and address of the other owner(s) as detailed on the property deeds.

.....

19. What type of property is it? Please tick the relevant box

flat	bungal	ow	terraced house	semi-detached house
detach house	ed	Othe (ple	er ase specify)	

20. Does anyone reside in the property?

YES	NO	

21. If **YES**, please provide details

Name	Age	elationship to you

22. Estimate of present value £..... (Please provide two estate agent valuations dated within the last three months).

23. How long has the property been on the market?

SECTION 5: DECLARATION

- I wish to make an application under the London Borough of Bromley's Deferred Payment scheme for a short term loan.
- I understand that acceptance of any application under this scheme is subject to the criteria set out in the London Borough of Bromley's Deferred Payment Policy.
- I confirm that I own/ part-own (delete as appropriate) the property specified in Section 4. I authorise the London Borough of Bromley to check legal title to this property.
- I agree to provide a solicitors undertaking as security for the loan.
- I agree that I am responsible /(Name of person signing in section 2 on behalf of applicant / delete as appropriate) for payment of the applicant's weekly assessed contribution due from their income and capital assessed under the Care Act 2014, the Care and Support Statutory Guidance 2014, The Care and Support (Charging and

Assessment of Resources) Regulations 2014 and The Care and Support (Deferred Payments) Regulations 2014

• I confirm that I and all other persons who occupy or have a beneficial interest in the property specified in section 4 have been made aware of this application and they have been advised to seek their own independent legal and financial advice before I enter into an agreement under the London Borough of Bromley's Deferred Payment scheme.

Name and address of Solicitor:

.....

- I confirm that all of the information given on this form is true and accurate to the best of my knowledge
- I have read and understood and accept the terms and conditions of this application for a short term loan from the London Borough of Bromley.
- I understand that the London Borough of Bromley will store the information provided on this form on paper and on computer. I agree that when necessary this information may be shared with other organisations that work with the London Borough of Bromley. I understand that the information will be kept secure and confidential and that I can request to see information held at any time in accordance with the Data Protection Act 1998.
- The offer of a short term loan is subject to the criteria set out in the London Borough of Bromley's Deferred Payment Policy and if the application is declined, the London Borough of Bromley will write to you or your agent declared in section 2, in order to inform you of the reason for its decision.

Signed	
Name	
Date	
Signed on behalf of	
Authority held	

If you are signing on behalf of the person applying for a short term loan in section 1, you must be the person named in Section 2 and have legal authority to act on their behalf. A certified copy of this legal authority should be attached to this application form.

GUIDANCE NOTES

Note 1

You can only sign this form on behalf of your relative, friend or client if you hold the appropriate legal authority to act on their behalf. A copy of this authority should be submitted with this application.

If you do not have legal authority or if you are in the process of applying for it, you can fill in the details on the form, but the person applying for the short term loan *must* sign the form themselves.

If the applicant lacks capacity and the person named in Section 2 does not have legal authority to act on their behalf, you can still complete this form however you will need to provide evidence of your application to the Court of Protection (e.g. a copy of the Court's acknowledgement of your application) and a certified copy of the legal authority to act for the applicant, once you have received it.

Note 2

The date that you give here should be the date your residence became permanent. (If you entered the home on a temporary basis, you should give the date of the Council's decision that you have eligible care needs which are to be met through residential/nursing care or supported living.

Note 3

If you meet the criteria for a 12 week property disregard the value of your property will be disregarded in your financial assessment for the first 12 weeks of your permanent placement. You will also be entitled to a 12 week property disregard if a qualifying relative dies or moves into a care home.

Your assessed weekly contribution will be based on your income and capital only. (*Please note all service users in permanent residential care are still required to pay the assessed contribution during the 12 week property disregard period*).

Note 4

The contribution that the Council pays towards a service user's residential care is based on the personal budget which is the cost to the local authority of meeting the person's eligible needs.

In some cases, a person may actively choose a setting that is more expensive than the amount identified for the provision of the accommodation in the personal budget. Where they have chosen a setting that costs more than this, an arrangement will need to be made as to how the difference will be met. This is known as an additional cost or 'top-up' payment and is the difference between the amount specified in the personal budget and the actual cost.

You should not agree to enter into a "top-up" agreement with a care home without seeking written approval from the Council if you are applying for a deferred payment.

Where there is a third party top up, the third party will continue to be responsible for payment of the third party contribution while the property is being sold.

Note 5

The Council will require:

- i. a copy of the contract from the estate agent/s which confirms the instruction to act for the vendor to sell the property,
- ii. a solicitor's undertaking which confirms that the proceeds of the sale will be used to settle the outstanding debt to the London Borough of Bromley for care home fees.

Note 6

The completed form and all documents required should be sent to:

The Financial Assessment and Management Team Liberata UK Ltd 3rd Floor North Block Civic Centre Stockwell Close Bromley BR1 3UH

More information about meeting your costs of residential care is provided in the Council's "Paying for your Care Home Guide" available at www.bromley.gov.uk

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Agenda Item 7e

Report No. CS14123	London Borough of Bromley PART 1 – PUBLIC		
Decision Maker:	For pre decision sc	ORTFOLIO HOLDER rutiny by CARE SERVI SCRUNITY COMMITTEE	
Date:	Wednesday 21 st January 2015		
Decision Type:	Non-Urgent	Non-Executive	Non-Key
Title:	BROMLEY CITIZEN	S ADVICE BUREAU CO	ONTRACT
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 an	d Health Services
Ward:	(All Wards);		

1. Reason for report

This report outlines the contractual arrangements for the provision of general advice and information services in the London Borough of Bromley provided by Bromley Citizens Advice Bureau for the period April 2015 to March 2016.

The report also provides an update on the level of service provided by Bromley Citizens Advice Bureau following changes to the model of service from traditional 'open door' services to a model based on outreach provision, telephone and web access.

2. RECOMMENDATION(S)

The Care Services Policy Development and Scrutiny Committee is asked to note and comment on the proposal.

The Portfolio Holder is asked to agree:-

(1) The award of a contract for the provision general advice and information service to Bromley Citizens Advice Bureau for a period of one year from 1st April 2015.

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: Estimated Cost: £145,000 (2015/16)
- 2. Ongoing costs: Proposals is for 2015/16 only
- 3. Budget head/performance centre: 813 900 3426
- 4. Total current budget for this head: £145,000
- 5. Source of funding: ECHS existing Revenue Budget

<u>Staff</u>

- 1. Number of staff (current and additional): N/A the Service is provided by an external provider
- 2. If from existing staff resources, number of staff hours: Approximately 16 hours per annum Officer time to monitor the contract.

<u>Legal</u>

- 1. Legal Requirement: Government Guidance
- 2. Call-in: Applicable:

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Estimated 2000+ people per annum across the borough

Ward Councillor Views

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

3. COMMENTARY

3.1 Background

- 3.1.1 Bromley Citizens Advice Bureau is a voluntary organisation contracted by the Council to provide information, advice and guidance services across a range of issues to the residents of Bromley. Bromley Citizens Advice Bureau is a member of the National Association of Citizens Advice Bureaux (NCAN) and as such have access to an in depth framework of support and up to date information which enables them to deliver a comprehensive service, this framework is not available to private organisations. Nationally there is a move to establish national help lines and web based information, as with Consumer Direct as an alternative for people to access advice and guidance services. The Citizens Advice Bureau federation is developing a national advice line (phone and web) in line with government policy. The service enables residents in the borough to access support and advice, including advice on benefit entitlement which has had a positive impact on the local economy and reduces the demand on other services.
- Since 2012/13, Bromley Citizens Advice Bureau has transformed how the 3.1.2 service is provided to Bromley residents this has resulted in reducing costs to the Council by 40% over three years. Bromley Citizens Advice Bureau is able to keep its unit costs low because of its extensive use of trained volunteers and specialists. Bromley Citizens Advice Bureau has moved to a mainly telephone and internet based service with key outreach venues without impacting on the number of people being provided with a service. As part of the service transformation the bureaux in Penge and Orpington closed and a number of outreach venues established in these areas. From the monitoring information supplied by Bromley Citizens Advice Bureau, the number of people accessing the outreach provisions in these areas has continued to grow. As a comparison during guarter 4 2013/14 (1st January-31st March 2014) 509 contacts were made to outreach venues rising to 541 during the first quarter of 2014/15 (1st April-30th June 2014); an increase of 6%.
- 3.1.3 Officer support is given by the Council to Bromley Citizens Advice Bureau to access other funding, for example the Government funding now available to build less reliance on Council funding.
- 3.1.4 In 2012 an information kiosk was installed in the remaining Bureau at Bromley Town. This has given members of the public easy and instant access to information. In addition, the Bureau re-organised its client processing with greater emphasis on signposting residents to more appropriate organisations or directing members of the public to the information kiosks allowing advisors to focus on the more complex cases.
- 3.1.5 The types of enquiries dealt with by Bromley Citizens Advice Bureau continues to be around issues of benefits, debt, employment, housing and immigration.

3.2 New Contract

- 3.2.1 It is not proposed to tender this service as Bromley Citizens Advice Bureau has demonstrated that it can provide a robust and comprehensive service and has the management infrastructure in place to be able to provide the requirements set out in the Service Specification. There are no other organisations which have the nationally recognised brand nor the experience of providing general advice services across a wide area.
- 3.2.2 The current contract expires on 31st March 2015 and it is proposed to enter into a new one year contract with Bromley Citizens Advice Service. As with all Council contracts, the contract will include a break clause which would allow the Council to terminate the contract should the provider be in breach or should the Council wish to reconsider the funding position.
- 3.2.3 Officers will continue to maintain quarterly monitoring with Bromley Citizens Advice Bureau, including receiving quarterly monitoring reports during the contract period.

4. POLICY IMPLICATIONS

4.1 The provision of advice and information services meets the Council's objectives to enable people to maximise their independence particularly for vulnerable people.

5. FINANCIAL IMPLICATIONS

5.1 Council funding has reduced by 40% over the life of the current contract. It is proposed that the new contract will be for one year at the current annual contract price. It is proposed that no inflationary increase to Bromley Citizens Advice Bureau for the duration of this Contract would be made. The table below sets out the previous and proposed cost of the contract.

2012/12	2012/13	2013/14	2014/15	2015/16
Contract Price	Contract Price	Contract Price	Contract Price	Contract Price £
£	£	£	£	
249,750	220,000	160,000	145,000	145,000

6. LEGAL IMPLICATIONS

6.1 The Service provided by Bromley Citizens Advice Bureau is a Part B Service for the purpose of Schedule 1 to the Public Contract Regulations 2006. This means that it is not essential to follow the OJEU processes, although in the interest of good practice the Regulations will be shadowed. Award of contract is primarily governed by the Council's Contract Procedure Rules and Financial Regulations.

- 6.2 Rule 3.7 of the Council's Contract Procedure Rules state "Where a Service is to be provided by a Voluntary Sector Organisation through an external Service Level Agreement the relevant Chief Officer, in consultation with the Director of Resources, can decide not to obtain competitive tenders or quotations provided that:
 - The Chief Officer is satisfied that the Voluntary Sector Organisation is, or will be able to provide a satisfactory quality of Service and that the sums payable under any Service Level Agreement entered into represent Value for Money;
 - The relevant Head of Finance keeps a record of all payments made and any Grants received under the Service Level Agreement;
 - The Service Level Agreement is time limited and subject to renewal under the arrangements identified in this Rule.

Approvals will be obtained as provided for in Rule 13.1, as appropriate for the estimated total value of the intended arrangement.

Non- Applicable Sections:	PERSONNEL IMPLICATIONS
Background Documents:	http://cds.bromley.gov.uk/documents/s11585/Exec-141211Infoadvice%20services.pdf
(Access via Contact Officer)	http://cds.bromley.gov.uk/documents/s50005266/Bromley%20Citizens%20Advice%20Bureau.pdf

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Agenda Item 7f

Report No. CS14117	London Borough of Bromley PART 1 - PUBLIC		
Decision Maker:	for Pre-scrutiny	Policy Development and Portfolio Holder for Decis	•
Date:	21 st January 2015		
Decision Type:	Non-Urgent	Non-Executive	Non-Key
Title:	ANNUAL QUAL	ITY MONITORING REPO	RT
Contact Officer:	Wendy Norman, Strategic Manager, Procurement and Contract Compliance Tel: 020 8313 4212 E-mail: wendy.norman@bromley.gov.uk		
Chief Officer:	Terry Parkin, Executive Director of Education, Care and Health Services Tel: 020 313 4030 E-mail: wendy.norman@bromley.gov.uk		
Ward:	Boroughwide		

1. Reason for report

- 1.1 The Policy Development and Scrutiny Committee receives annual updates on quality monitoring. This report covers the arrangements for monitoring contracts and progress made to raise standards in:
 - domiciliary care (Appendix 1)
 - care homes, extra care and supported living schemes (Appendix 2)
 - Children's services (Appendix 3)
- 1.2 The report also recommends the addition of 2 care agencies to the Domiciliary Care Framework.
- 1.3 The Care Quality Commission (CQC) are introducing new ratings for providers and the report proposes changes to the Council's policy in response to poor ratings.

2. RECOMMENDATION(S)

- 2.1 Members of the Performance Development and Scrutiny Committee are asked to:
 - Consider and comment on the report.
 - Undertake a programme of visits to Care Homes in the Borough during 2015/16
- 2.2 The Portfolio Holder is asked to agree that the providers listed below are added to the Domiciliary Care Framework:

- Carewatch Bromley
- Always Caring
- 2.3 The Portfolio Holder is asked to agree the policy set out in para 3.4 to 3.7 which sets out the Council's response to the new CQC ratings.

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: Estimated cost no cost directly arising for the recommendations in the report.
- 2. Ongoing costs: N/A.
- 3. Budget head/performance centre: 1)Residential and nursing home, domiciliary care,
- 4. Total current budget for this head: £Care homes £34m pa, Domiciliary Care -£13m pa,
- 5. Source of funding: Revenue Support Grant

<u>Staff</u>

- 1. Number of staff (current and additional):
- 2. If from existing staff resources, number of staff hours: 3 FTE Contract Compliance staff in Commissioning Division

<u>Legal</u>

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

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Care Homes - 1000,

Domiciliary Care - 1500, Children - 290

Ward Councillor Views

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

3. COMMENTARY

3.1 The Policy Development and Scrutiny Committee receives annual updates covering the arrangements for monitoring contracts and progress made to raise standards in services commissioned from third parties. This covering report details the general arrangements for Adult and Children's services. Detailed reports outlining the quality monitoring activity for Domiciliary Care, Extra Care Housing Care Homes, Supported Living Schemes and Children's placements are attached as appendices to this report.

Regulatory Frameworks – Adults

- 3.2 The regulatory framework covering care homes and domiciliary care agencies for adults is the Health and Social Care Act 2008. Care Quality Commission (Registration) Regulations 2009 and Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 detail the key care standards which providers must deliver. There are 28 regulations and associated outcomes that are set out in this legislation. The CQC monitors for compliance against these Essential Standards of Quality and Safety. CQC Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Essential Standards. Where concerns are identified, the CQC will then take whatever they consider to be the most appropriate action to ensure that the necessary improvements are made. Spreadsheets setting out the current ratings for all the Bromley providers are attached as Appendices 4 and 4a These also show the number of placements funded by the Council, the dates of monitoring visits made by the Council's Contract Compliance Officer and CQC.
- 3.3 The CQC website displays an entry for each registered provider. On the front screen there is a summary of the providers' compliance against each of the 5 key themed areas.
 - Treating people with respect and involving them in their care
 - Providing care, treatment and support which meets people's needs
 - Caring for people safely and protecting them from harm
 - Standards of staffing
 - Standards of management.

Key to CQC ratings

- $\sqrt{}$ All standards were being met when CQC last checked. if this service has not had a CQC inspection since it registered, the check may be based on CQC assessment of declarations and evidence supplied by the service themselves)
- X (grey cross) At least one standard in this area was not being met when CQC last checked and required improvements.
- X (red cross) At least one standard in this area was not being met when we last checked and CQC have taken enforcement action.

New CQC Rating system

- 3.4 The CQC are in the process of introducing a new rating system. The inspectors have been trained and a series of inspections under the new regime have already taken place. Inspections of adult social care services will consider whether the service is:
 - Safe.
 - Effective.
 - Caring.

- Responsive to people's needs.
- Well-led.

Every care home and adult social care service in England will be awarded one of the following ratings by March 2016.

- Outstanding.
- Good.
- Requires improvement.
- Inadequate.

In addition to changing the ratings the CQC will also be closely checking that providers have appropriate levels of management and that the registered person for that business has appropriate values and are well motivated. They are also consulting on a "special measures" policy which sets out the action CQC will take if care services judged to be inadequate fail to make required improvements within the required timescales. In the worst case the CQC will cancel their registration. The Special Measures policy will take effect from April 2015.

- 3.5 The Council currently has a policy of not making any new placements with a provider (care home or domiciliary care agency) where the CQC is taking enforcement action (red crosses). If CQC start to take enforcement action against a home the Council's Care Services teams will undertake a risk assessment of the home in order to decide what action should be taken in respect of current service users. Where a provider is given warning notices (grey crosses) the Council's Contract Compliance Officer will intensify the level of scrutiny of the provider.
- 3.6 Officers propose that the Council adopts the policy set out below to respond to the new CQC ratings of Care homes:

Inadequate :	 immediately suspend new placements if a Bromley home. do not propose new placements to out of borough homes Review existing placements and risk assess – may require moving. Agenda item for Care Services Intelligence Group(CSIG)
Requires Improvement	 Enhanced monitoring by LBB using QAF and CQC action plan. Agenda item for Commissioned Services Intelligence Group (CSIG)

3.7 Where service users have chosen to live out of the borough the contract compliance team undertake regular checks of the CQC ratings. Care Services are alerted to any issues raised about the quality of care provided and will take follow up action if necessary. Care Services staff review service users in residential care regularly in order to ensure that residents continue to be safely placed.

Quality Assessment Framework (QAF)

3.8 The Contract Compliance Team uses a QAF to measure the performance of providers against a range of standards in key areas. Standards are graded in four groupings, 'A', 'B','C' and 'D'. Level C is based upon the minimum standard of the 'Essential Standards of Quality and Safety' published by Skills for Care. If any area of service is graded level 'D' the provider is

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required to make immediate improvements as this is unsatisfactory. Grades 'B' and 'A; provide incentives to Providers to demonstrate continuous improvements in the quality of their service.

3.9 The QAF has been adapted for use across Domiciliary Care, Supported Living, Extra Care, Day Care and for all other contracts monitored by the ECHS Contract Compliance Team. All new contracts require the Provider to comply with the QAF. Providers are asked to complete an action plan for any areas where the score D. Officers compile the QAF scores, analyse the results and use these to highlight areas where practice needs to be improved at the quarterly forums run by the Council. If necessary additional training is commissioned.

Safeguarding

- 3.10 Bromley Safeguarding Adults Board funds a comprehensive training programme which all local providers can access. When safeguarding alerts are raised the Care Management teams instigate the Council's safeguarding procedures. Contract Compliance officers can be involved in safeguarding investigations and will ensure that providers follow up on learning points or action plans at the conclusion of each case. The Council's safeguarding manager convenes a regular meeting of officers from the Council, Bromley Clinical Commissioning Group, Bromley Healthcare, Oxleas, and CQC to exchange information and share any concerns about local providers. This ensures that any potential issues are identified early; that investigations progress appropriately and any learning requirements are factored into monitoring and training programmes.
- 3.11 Details of specific safeguarding events are set out in Appendices 1 and 2. The annual safeguarding report provides detailed information on the outcome of substantiated safeguarding alerts. This was reported to Care Services PDS on 3rd September 2014 and the link is below: <u>http://www.bromley.gov.uk/downloads/731/safeguarding_adults</u>

Training

- 3.12 The Council assists in raising the standards in care homes and domiciliary care by organising a comprehensive programme of training. Providers are invited to join a training consortium run by the Council which gives them access to courses for a small contribution towards costs. Membership continues to increase every year and there are currently 58 members of the consortium. The Council works with providers to ensure that the courses provided are appropriate, timely and assist providers in balancing the competing demands of delivering care and ensuring that staff receive both induction and refresher training.
- 3.13 The training courses address the requirements of the Essential Standards of Quality and Safety. Core training courses in first aid, food hygiene, health and safety and moving and handling form the majority of the training programme. The remaining courses provide valuable learning opportunities for care staff to gain additional skills and knowledge to help them carry out their duties. These include dignity in care, dementia, diet and nutrition, safe administration of medicines, report writing and infection control. The programme is regularly updated and reviewed to include training on new legislation. In 2014/15 officers identified that management and supervision training could make a positive impact in the local care homes and have designed a specific training programme for more senior workers.
- 3.14 The Council also works with key health partners based in Bromley to identify opportunities for joint health and social care training across all sectors. These initiatives have resulted in training for care workers on shared training programmes for Urinary Tract Infections and

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Diabetes Care, Dementia and Falls. Officers will continue to work jointly with health partners at a local and sub-regional level to ensure that we are able to maximize the training funds available in Bromley for the entire local workforce. Joint training programmes also assist to ensure a common understanding of roles between the different disciplines and professions.

Provider Forums

3.15 The Contract Compliance Team runs quarterly provider forums for Domiciliary Care and Care home and Supported Living Scheme providers. These events are well attended and provide the opportunity for good practice to be shared between all Care Homes and agencies. Key partners from health regularly attend the forums in order that any shared issues or problems can be raised and discussed and resolution sought. A recurring item at all forums has been the appropriate timing of hospital discharges and how providers can work with health partners in order to avoid inappropriate admissions. Other Key areas tackled during 2014 were involving relatives and carers in care homes and recruitment and management of staff. Officers from the London Ambulance Service and the Fire Service have attended forums during 2014 in order to work on improving practice and better partnership working.

Good Practice Conferences during 2014

- 3.16 The Care Home Compliance Officer ran a conference and follow up workshop for Activity Cocoordinators working in care homes in Bromley. Both of these events were extremely successful, being well attended and highlighting the vast range of resources available within the borough that can be brought into the care home environment. The programmes of activities within homes have significantly improved during 2014 and we expect to see these initiatives sustained.
- 3.17 The Council also hosted "Bromley Cares", a conference for families and informal carers of people living in care homes in Bromley. The focus of the conference was to ensure that these key partners are clearly aware of the standards of care that can be expected in care homes and are empowered to make comments and complaints in order to seek improvements. The conference was delivered by the Council in partnership with Carers Bromley and Healthwatch Bromley. Ensuring that this information is available to the community helps to ensure that there is a broader range of people continually observing care delivered in the borough. Officers will be running another event for relatives and carers during 2015 with a similar agenda.

The Care Act 2014

3.18 The Care Act 2014 which will be implemented from April 2015 includes additional responsibilities for the Council, particularly in regard of having an oversight of the local market for care services. In order to avoid any unexpected disruption in the market Officers monitor the financial health of local providers and tackle them should any problems emerge.

The Council's practical responsibilities are extended to arranging alternative care for selffunders should a local provider fail.

The Care Market in Bromley

3.19 During the last year the NHS has significantly increased its focus on reducing admissions to hospital and facilitating early discharges as soon as people are confirmed as medically fit. This policy has had a very significant impact on the provider market in Bromley, both care homes and domiciliary care agencies. The Placements Team are finding it increasingly

difficult to source both care home placements and care packages, particularly at the very short notice given.

- 3.20 Providers in the care sector all report that they are having increasing difficulty in recruiting suitable care staff. Some neighbouring Councils have adopted a policy of paying care staff the living wage which also impacts on the ability of providers to recruit carers to work on Bromley contracts.
- 3.21 The Council has been commissioning care placements from its Domiciliary Care Framework since 2012. Three providers on the framework are no longer providing care in Bromley, therefore Commissioners have sought replacement agencies in order to try and meet the demand. When the framework was set up the Council reserved the right to add new contractors, should one or more of the original Contracts withdraw, or be suspended or removed from the framework.
- 3.22 Officers have continued to monitor the quality of work of agencies who are supplying care on spot contracts. They have negotiated with the providers in order to reduce some hourly rates and can therefore recommend that the agencies Carewatch and Always Caring are appointed to the framework. These two agencies are delivering care within the rates for domiciliary care which were set by the Council when the framework was set up in August 2012. The rates were frozen for 2 years and were increased in August 2014 by 1.1%.

Regulatory Frameworks - Children's Services

- 3.20 Children's services are subject to regulation by Ofsted. Ofsted conduct a full inspection on a 3 year cycle for which they may make a judgement in the following categories:
 - Outstanding: a service of exceptional quality that significantly exceeds minimum requirements
 - Good: a service of high quality that exceeds minimum requirements
 - Adequate: a service that only meets minimum requirements
 - Inadequate: a service that does not meet minimum requirements

For any service receiving a judgement of either Adequate or Inadequate **annual** inspections will be conducted for which the following judgements could be made:

Good progress	The children's home has demonstrated continued improvement in quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the large majority of recommendations that were raised at the previous
Satisfactory progress	 inspection. The children's home has maintained quality of care and outcomes for children and young people and where appropriate has addressed all requirements and the majority of recommendations that were raised at the previous inspection.
Inadequate progress	The children's home has failed to address one or more requirements and/or has not met the majority of recommendations and/or the quality of care and outcomes for children and young people have declined

sin	ce the last full inspection.
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The Central Placements team will only make placements with providers that have a rating of Good or Outstanding. Further information on Children's Services is in Appendix 3.

4 POLICY IMPLICATIONS

4.1 National and local policies expect that continuous improvement be achieved in the quality of care delivered in care services serving the local community.

5 LEGAL IMPLICATIONS

- 5.1 Under Section 21 of the National Assistance Act 1948 the Council has a duty to provide or arrange for residential accommodation for persons who by reason of age, illness, disability or any other circumstances are in need of care and attention not otherwise available to them.
- 5.2 Once a person has been assessed as being in need of such care the Council must have regard to the National Assistance Act 1948 (Choice of Accommodation) Direction 1992 which are intended to give clients a choice over where they receive such care arranged or provided by the Council. Such choice has to reflect both the costs of such accommodation as well as its availability.

Non-Applicable Sections:	Personnel implications, Financial implications
Background Documents: (Access via Contact Officer)	ACS14008 Quality Monitoring of Domiciliary Care, Care Homes and Children's Placements
	Framework Agreement for the Provision of Domiciliary Care Services.

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Domiciliary Care and Extra Care Services

- 1.1 The Council supports approximately 1,100 people in Bromley to stay in their own homes through the provision of domiciliary care services.
- 1.2 Services are procured from a Framework of Providers which was awarded in August 2012 following a Procurement Exercise. There are 22 providers on the framework, all of whom meet robust quality standards. In order to comply with Financial Regulations, new care packages are offered out to all contracted providers on the Framework. A key feature of the contract is that all providers are required to use an electronic call monitoring system (ECM). This assists them to monitor the timings of calls and to investigate any discrepancies in timing with carers.

REGISTRATION

- 1.3 Domiciliary care agencies providing personal care are required to register with the Care Quality Commission (CQC) under the Care Quality Commission (Registration) Regulations 2009 introduced by the Health and Social Care Act 2008. The CQC currently monitors for compliance against The Essential Standards of Quality and Safety. Compliance reports may identify 'minor', 'moderate' or 'major' concerns against any of the Essential Standards. The CQC inspection regime is changing as described in the main body of this report. Where the CQC identify concerns, they will take action to ensure that the necessary improvements are made.
- 1.4 The Council continually monitors the registration status of domiciliary care agencies and if at any time we have concerns about this status we reconsider the contractual arrangements with the agency. A schedule of agencies used by the borough with their CQC scores and a record of the contract monitoring visits can be found in Appendix 4.

CONTRACT MONITORING

- 1.5 Contract monitoring meetings are scheduled based on a risk assessment. The Contract Compliance officers use the Essential Standards of Quality and Safety and the Quality Assessment Framework (QAF) to assess a contractor's performance. They also review recent complaints and comments made by Care Services. Each agency is visited at least annually, and agencies with more clients are monitored quarterly. Compliance Officers schedule additional visits as necessary if they have concerns about an agency's performance. Monitoring covers five key areas:
 - Assessment and Care Planning.
 - Medication

- Protection of Service Users and Staff.
- Quality Assurance
- Organisation and Running of the Business.
- 1.6 At the meeting the monitoring officer discusses progress on each key area with the provider and their staff and scrutinises supporting documentation evidence produced. The QAF is used for all monitoring of Domiciliary Care Services so each section of the QAF is completed and a score given. Following each monitoring meeting an action plan is jointly agreed which is then followed up on subsequent visits.
- 1.7 During 2014 officers focussed specifically on the quality of service delivery confirmed through the use of Electronic Call Monitoring (ECM) by agencies. The key points were: :
 - Monitoring the length, time and spacing of calls for service users
 - Ensuring that Carers are logging in and out regularly using ECM (overall compliance)
- 1.8 Where Officers identify that improvements are required, they ask the provider to complete an action plan which is followed up at the next monitoring visit. The use of ECM is also checked by a Quality Assurance Officer in the users homes

QUALITY ASSURANCE

2.0 A Quality Assurance Officer visits service users and their carers to find out at first-hand how well providers are performing. The information gathered from users is analysed and any issues highlighted are addressed with providers at monitoring meetings and if appropriate are carried forward into action plans. The schedule of quality assurance visits is designed to co-ordinate with the Contract Monitoring schedule.

Any serious issues are raised immediately with the Agency; otherwise the Agency receives a report at the end of a set of client visits outlining the general feedback.

- 2.1 The main issues clients identified in 2013 through quality assurance visits were carers being in a rush and not staying for the full length of the planned visit. Feedback from clients over this year has shown that agencies practice in these areas has improved.
- 2.2 Concerns raised during 2014 which are common across all agencies:
 - Service users/families have reported that they would like a better introduction, particularly for new users of Domiciliary care.
 - Service users would like care agencies to keep them informed of lateness
 - Service users would like to be informed of the name of the carer who will be attending if it is someone unfamiliar.

- Service users prefer to have consistent care staff.
- 2.3 When issues about poor standards of service are identified through contract monitoring or reported by other stakeholders LBB Officers initially investigate them with the agency. Often the investigation will result in the setting of an action plan for the agency which Officers regularly monitor to ensure that improvements are made and sustained. If standards fail to improve officers may take additional action; for instance the Council will stop making new placements to the agency until improvement has been demonstrated.
- 2.4 During September 2014 the Council suspended new placements to Bridges Healthcare and issued a Contract default notice after concerns about Quality Assurance Systems and poor planning and delivery of calls and in particular a number of missed calls. Officers put in an enhanced monitoring programme and met with the agency to discuss business planning and organisation. Recent monitoring shows that improvements are being made. The team will continue to check on progress before recommending the suspension is fully lifted.
- 2.5 The contract with Ark was terminated in in March 2014 due to their decision to re-locate their office to Sheffield which is outside the terms of the contract, requiring providers to have a local office. Clients were offered the choice of a Direct Payment or an alternative Framework Provider. This transfer was handled smoothly and each client had a visit from a Quality Assessment Officer several weeks after the change of Provider to ensure that the change of agency had gone well.
- 2.6 The Council issued a default notice to Care UK in December 2014 after serious concerns over missed visits. Care UK are currently working on an action plan and have a completion deadline of January 2015 before a follow up compliance visit to check on progress.
- 2.7 Default notices were issued to Eleanor Care and Guardian Homecare in March 2014 for failing to implement a complete and fully operational ECM system. Both defaults were remedied swiftly.
- 2.8 During February 2014 the Council suspended new placements with Verilife and issued a default notice after the agency failed to make improvements following a compliance visit in December 2013. Improvements were required in training and supervision of staff, and care planning and risk assessments for clients. The default was remedied and suspension was lifted in May 2014.
- 2.9 The Compliance Team met with Caremark in July 2014 following a rise in the number of informal complaints and following feedback from the Quality Assurance Officer. The informal complaints recorded were mainly about the quality of care received and inconsistency of carers. This was highlighted by Service Users and their families asking for their care to be moved from Caremark. At the meeting the agency outlined their plan to improve their practice and subsequently the number of complaints has reduced.

2.10 In November two framework agencies reported staffing difficulties and had to cease delivering care in Bromley. (MiHomecare and Care Matters). A total of 20 clients were moved to other agencies on the framework.

COMPLAINTS

- 3.0 Front line Care Services staff take the lead on dealing with informal (unwritten) complaints about agencies. Formal complaints are forwarded to the contract compliance officers by the ECHS complaints officers for investigation. Investigations are conducted with the relevant agency which is expected to provide any information relevant to the complaint. This may include ECM records, timesheets, care records from service users' homes and statements from any agency staff involved in the issues raised.
- 3.1 Overall the number of complaints made about domiciliary care agencies has remained stable, although there was a dip during the year 2012/13. From April to November 2014 we have received 15 formal complaints. The number of complaints received by the council about each agency is set out in the table below.

Care Agency Name	2014/15*	2013/14	2012/13	2011/12	Total	No of clients 1st Dec 2014
ACSC				1	1	75
ALLIED				0	0	37
ARK HOME HEALTHCARE		4		1	5	0
AMAZING				1	1	0
BRIDGES	3	1		1	5	31
BROMLEY MIND				1	1	0
BS HOMECARE		1	1		2	1
CARE UK	1		2	2	5	36
CAREMARK	4	2			6	166
CARE WATCH				0	0	72
DARET HOMECARE	1				1	13
ELEANOR CARE	1				1	24
ETERNAL CARE	2				2	33
GUARDIAN HOMECARE		1			1	20
HARMONY HOMEAID			1	0	1	14
KENTISH CARE		1		1	2	48
MACKLEY				1	1	9
PLAN CARE	1				1	3
REDSPOT				1	1	0
SEVACARE		2			2	8
SURE CARE		4		3	7	181

3.2 In addition to monitoring formal complaints received by agencies the Contract Compliance officer also checks the number of complaints received and resolved by directly by agencies.

THE LINK	1				1	36
VERILIFE	1	1	1		3	115
WESTMINSTER			1	2	3	77
	15	17	6	15	53	

*April to November 2014

EXTRA CARE HOUSING

- 3.3 The contract compliance team also monitors the quality of service provided in externally provided Extra Care Housing Schemes for older people. These schemes are also governed by the CQC regulations for Domiciliary Care Agencies; the QAF is used to monitor care and support and the frequency of monitoring visits is determined by our standard risk assessment tool.
- 3.4 There are 3 external Extra Care Housing schemes in borough where tenancy support is provided by the Landlord and care has been commissioned from an external Provider. London Ambulance Service identified these schemes as having high call out rates for ambulances for falls this year. In response the Council purchased special lifting equipment for each scheme and falls prevention training was organised. There has been a reduction in the number of ambulance call outs.
- 3.5 At Regency Court where the care is provided by Sanctuary Care, there was an increase in the number of complaints and safeguarding alerts during the year. As a result the Council suspended new placements to the scheme in June 2014, which was lifted in August 2014. Officers continue to meet frequently with Sanctuary to monitor progress.
- 3.6 The Clinical Commissioning Group are in the process of appointing dedicated Visiting Medical Officers for each scheme, which should help to reduce the number of hospital admissions and ensure that appropriate medical advice is accessed speedily be all schemes.

SAFEGUARDING

3.7 When safeguarding alerts are received the care management teams instigate the Protecting Adults at Risk London Multi-agency Policy and Procedures to Safeguard Adults from Abuse. Monitoring officers can be involved in safeguarding investigations and always follow up on learning points or action plans at the conclusion of each case.

The Council's Adult Safeguarding Manager chairs the Care Services Intelligence Group which includes Safeguarding and Contract Compliance Teams with the safeguarding lead practitioners and partners from the Clinical Commissioning Group, Oxleas, CQC and Bromley Healthcare. The group monitors current information and shares any safeguarding concerns about local homes and domiciliary care agencies, to identify any patterns which need investigation. This ensures that any potential issues are picked up and factored into monitoring and training programmes early.

- 3.8 There have been 19 safeguarding referrals so far in 2014/15 (to end November) compared to 25 in 2013/14. Many referrals concerned suspected financial abuse or neglect. In every case of suspected financial abuse and in certain other cases the police are involved and the care worker suspended whilst an investigation takes place.
- 3.9 Officers consider all information available to establish the facts, including whether or not there are patterns of complaints or grumbles about the care worker, or from the user. Where allegations against care workers are substantiated they are reported to the Disclosure and Barring Service which will then show up in any DBS checks for future employment.

Quality Monitoring in Care Homes and Supported Living Schemes

Adult Residential Care

- 1.1 Officers undertake an annual risk assessment of the care homes in the borough and devise a monitoring schedule which includes more visits on care homes assessed as having a higher of risk. During 2014 the Contract Compliance Officers will have visited all Bromley care homes. Seventy seven visits have already been carried out across 53 homes up to the end of November 2014. The remainder of the homes in borough will be visited before the end of the financial year.
- 1.2 During 2014 the team have continued with the implementation of the Quality Assessment Framework (QAF) and 58 of the 77 visits above (75%) used the QAF to give an assessment against the criteria. This has enabled the team to identify areas of strength and weakness across Residential Care Homes in the borough.

Areas where good practice and improvements were evidenced across several homes:

- Activity provision and meeting people's social needs as well as meeting care needs
- Business Continuity Plans have been strengthened and tested with staff to ensure adequate responses in emergency situations
- Liaison with external medical professionals/agencies, including participation with CCG initiatives such as a Borough-wide training needs analysis
- Environmental improvements (i.e. facilities, maintenance, cleanliness)

Areas of concern:

- Involvement in Care:
 - Providers cannot demonstrate engagement with service users and their advocates
 - Providers cannot provide evidence that people are involved in their Care Planning process
- Many providers lack confidence in their ability to embed the practices of Mental Capacity Assessing, particularly evidencing how best interests decisions are made on behalf of people who lack capacity
- Providers are do not supervise or appraise their staff as frequently as stated in their policy. Some providers are struggling to retain and recruit staff

These areas of concern picked up through monitoring have been used as themes for learning and discussion in the Care Home Forum which is held quarterly throughout the year for Providers. Additional training has been made available to providers on Mental Capacity Act and Deprivation of Liberty safeguards.

1.3 An area of concern that was picked up through monitoring last year was the low level of planned structured activities provided in the homes. The team have held two activities conferences during 2014 to bring together the Activity Co-ordinators from the Care Homes with local providers of activities to enable networking and the sharing of ideas.

- 1.4 The team hosted a 'Bromley Cares' event in March 2014, to help inform Carers what standards of care they should expect from residential services and who they can go to for help should they need any. There were representatives from CQC, Healthwatch, local care homes as well as the Voluntary Sector.
- 1.5 The monitoring officers consider the following information before visiting a home:
 - Safeguarding alerts
 - Complaints
 - Regulation 16/18 reports (also copied to CQC reports of death, serious injury, hospital admission, outbreak of disease, medication errors etc
 - Information from other stakeholders, e.g. Care Managers, Carers, Health Professionals
 - Observations made during training courses.
 - Results from customer satisfaction surveys
 - Information supplied by Members, following visits.
 - Regular maintenance and fire safety reports.
 - Whistle-blowers
 - Information from colleagues working in the health services
- 1.6 The feedback received from all the different sources listed above is used by compliance officers and we recognise the value of gathering information from as wide a range of sources as possible as this sometimes reveals concerns which the contract compliance visits do not pick up.
- 1.7 Healthwatch started a programme of Enter and View visits during 2014. They have visited 1 care home and 1 nursing home so far, with positive feedback given to both.
- 1.8 A programme of visits has been drawn up for Members to visit including 9 Care Homes during 2014-15. Officers have provided a template with suggestions of aspects of the home and care delivered that members might observe during visits and report back to monitoring officers. The team has been receiving comprehensive feedback throughout the year, which has been followed up with the homes concerned. Members visited White House, a small home in February 2014 and raised concerns with Officers which were followed up. The Owners closed the home in September 2014.
- 1.9 Other local changes have been that the Intermediate Care Unit moved to Lauriston House from December 2013, with the care provided by Bromley Healthcare as the registered provider for the unit. Elmwood Nursing Home opened a new Dementia Unit for 25 people in March 2014.

Supported Living Schemes

1.10 The contract compliance team also monitor the quality of service provided in supported living schemes for people with learning disabilities which have been developed in the borough over the last few years. Care in these schemes is covered by the CQC regulations for Domiciliary Care Agencies. Officers have amended the QAF for monitoring care and the frequency of visits is determined by a risk assessment.

1.11 There are 19 Supported Living Schemes in the borough and all have been visited regularly during 2014. The care providers in some of the schemes have been changed during the year, so monitoring is increased in these schemes to ensure the new providers meet the quality standards we expect. We have also made unannounced visits at weekends and out of hours to follow up on individual safeguarding concerns.

Safeguarding

- 2.1 When safeguarding alerts are raised the Care Management teams instigate the Protecting adults at risk London multi-agency policy and procedures to safeguard adults from abuse. Contract Compliance officers can be involved in safeguarding investigations and always follow up on learning points or action plans at the conclusion of each case. The Council's safeguarding manager meets regularly with a joint agency group of the Council, CQC and health commissioners to exchange information and share any concerns about local homes. This ensures that any potential issues are picked up and factored into monitoring and training programmes.
- 2.2 Between January and November 2014 the Council received 98 safeguarding referrals in Bromley care homes and 43 of these have been concluded. Ten of the referrals were substantiated. These referrals referred to 32 different care homes. When compared with information available for the last report, this year's figures are broadly in line with the figures from last year. (93 referrals, 11 substantiated to November 2013)
- 2.3 During 2014 safeguarding investigations at Archers Point raised concerns about poor care that caused the Council to stop making placements. The Assistant Director has led meetings with the Provider's management team to ensure that the need for robust improvement action is accepted and followed through. Officers are continuing to work with Archers Point and significant improvements have been made, although the suspension will remain in place until the action plan is completed.
- 2.4 In January 2014 the CCG and the compliance team raised concerns about Sundridge Court Nursing Home around a lack of registered nurses at the home, poor care planning and pressure wound care. Care Managers carried out reviews on Bromley funded residents, Officers met with the Regional Manager and are monitoring Sundridge Court against an action plan during the year until improvements are complete.
- 2.5 Council Officers have continued with the policy of not making placements with those providers where CQC indicate that they are taking enforcement action. This year new placements at Rosecroft, Fairmount Nursing Home, and Ashglade Nursing Home were suspended until CQC confirmed that the required improvements had been made.
- 2.6 New placements of Council funded residents are suspended in Jansondean Nursing Home whilst the home makes the required improvements. In each case, the Contract Compliance Officer requests a copy of the action plan the home has submitted to the CQC, so that enhanced monitoring of the home against the plan can be done.
- 2.7 Council Officers who specialise in safeguarding attend the Council's Care Home forums in order to ensure that providers are kept up to date with

requirements. Providers are also represented on the Adult Safeguarding Board which ensures that provider issues are considered as part of this multiagency approach.

Out of Borough placements

- 2.8 All service users living in out of borough placements are reviewed annually by Care Services.
- 2.9 In November 2014, the team reviewed the care ratings of all homes out of borough where the Council has made placements. Officers wrote to local authorities for Care Homes that were not meeting all CQC regulations, to ask them to complete a short questionnaire about their knowledge of the care provided in these schemes. This exercise covered 34 homes across 15 local authorities and to date we have received responses about 25 homes. So far there have been no additional concerns picked up. The responses are checked and stored on Carefirst for Care Management review.

Appendix 3

CHILDREN'S SOCIAL CARE PLACEMENTS

The Council have made 203 placements of children in this financial year (from 1st April 2014 to 21st November 2014). These placements range across a number of placement types and geographic spread, both in borough and out of borough, and are dependent and determined by the needs of the young person and individual family circumstances.

Service Standards

Service provision for children and young people (CYP) under 16yrs is required to comply with the Care Standards set by Care Standards Act 2000 and are regulated and inspected by Ofsted. This includes Residential Parenting Assessment Centres, Independent Foster Agencies (IFAs), Children's Homes, Special Schools, Residential (Boarding) Schools and Secure accommodation (for both remand and welfare placements).

Count of Child ID	
DfES Type Desc	Total
Children's home outside LA boundary	17
Family Centre / Mother and Baby Unit	10
Foster placement with relative / friend outside LA	7
Foster placement with relative or friend in LA	13
NHS / Health Trust / medical or nursing care estab	4
Placed with foster carer provided by LA outside LA	32
Placement with agency foster carer in LA	21
Placement with agency foster carer outside LA	43
Placement with foster carer, provided by LA in LA	50
Residential Provision not Subject to CH Regs	2
Residential School	2
Secure unit outside LA boundary	2
Grand Total	203

Ofsted conduct a full inspection on an annual cycle for residential units and a 3-year cycle for independent fostering agencies, for which they may make a judgement in the following categories:

Outstanding: a service of exceptional quality that significantly exceeds minimum requirements

Good: a service of high quality that exceeds minimum requirements **Requires Improvement**: a service that only meets minimum requirements **Inadequate**: a service that does not meet minimum requirements

The Central Placements team will only make placements with providers that have a rating of Good or above.

Quality Monitoring

The majority of our providers are affiliated to the London Care Placements (LCP) consortium which means that they have been inspected, accredited and are monitored annually by the consortium officers as well as the registration and inspection processes of Ofsted. Each year the London Care Placements team negotiate base fees and uplifts on behalf of the London authorities and issue a core contract as part of the affiliation process. Each year the Authority pays an affiliation fee which covers the cost of the services provided by the consortium. In this financial year, 2014/15 this was £5,800.

The consortium also maintains a record of the Ofsted inspection outcomes and removes any providers from the approved list who receive an inadequate rating. The London Care Placements team keep the providers under scrutiny and will reinstate them to the approved provider list only when their rating has been adjusted upwards.

In addition to the monitoring carried out by the consortium the Care Planning, Placement and Case Review Regulations 2010 require placing authorities to conduct visits to providers prior to making a placement if the provider has not been used by the authority in the previous six months. In Bromley either the social worker for the child or a Placement Officer will undertake a visit to the proposed providers prior to a placement being made. In any given year a number of visits will be undertaken by the Placements team to new providers (including those out of borough) and we use the London Care Placement formats for the assessment reports.

In addition we review Ofsted inspection outcomes with the provider or Ofsted to ensure that any recommendations or requirements set by Ofsted have been followed through and actioned by the provider and references are taken from other placing authorities prior to making a placement.

Where an Ofsted judgement drops during the lifetime of a placement the local authority is notified in a number of ways :

- As part of the service offered by the LCP providers are monitored on behalf of the London authorities. Providers registered with the consortium are required to notify the consortium officers of the outcome of any Ofsted inspection and local authorities placing with that provider are in turn notified by LCP of any change in inspection outcome;
- Providers generally will send a copy of their last Ofsted inspection report to all the local authorities who have a child placed in their care, in particular if their inspection outcomes are Outstanding as this becomes part of their marketing material;
- Children's Homes are required by the Children's Home Regulations to evidence their ability and standard of care via an independent inspection on a monthly basis by a suitably qualified individual, (Regulation 33 visits). These reports are required to be sent by the

provider to all the placing authorities every month. What do we do with them? These reports are read by the Children's Co-ordinator and any issues raised with the child's social worker, team manager, or senior manager (as appropriate).

- The Social worker for the child, the IRO and the Placements team as directly involved professionals are responsible for ensuring that the standards within the care provision are kept under review and are confident of the ability of service provider to deliver the level of care expected.
- Ofsted will notify all placing authorities where the outcome of an inspection identifies safeguarding concerns and if the provision receives a judgement of "Inadequate".

Where Bromley receives such a notification a review of the placement will be undertaken – have we received any in this time frame?. The social worker for the child/ren will undertake a visit to the child and conduct a risk assessment. Depending on the reasons for the judgement a strategy meeting may be called by the Quality Assurance and Safeguarding team within Children's Social Care, to review the report outcomes, notification details and to determine whether or not to recommend the removal of any child from the care of the provider.

For any service receiving a judgement of either "Requires Improvement" or "Inadequate" a 6 month and annual inspections will be conducted by Ofsted to ensure that the Action Plan, recommendations and requirements issued by Ofsted are progressing and meeting deadlines.

Contracting Arrangements

All placements for Children's Social Care are made by the Placements team in the Commissioning department on a spot purchase basis in order to ensure that the full range of provider options is available to the service. This enables the Placements team to both match the child with the provision that can most meet the identified needs and to negotiate each individual placement in line with the specific service requirements of the child to achieve the best outcomes for them and value for money for the Council.

Spot purchasing of placements also enables the Authority to be very timely in its responses to poor service delivery if this should arise. The provider would be excluded from any future referrals until action had been taken to address any identified areas of concern. A number of providers have been suspended from receiving referrals during periods of investigation in the past year, some of these remain on-going whilst discussions take place with the providers and/or where concerns have been raised and the provider's response has not met a satisfactory conclusion.

Standard terms within the London Care Placement contract which we issue require the provider to comply with Care Standards, safeguarding procedures and the requirements of either Fostering or Children's Home regulations in respect of all issues relating to safeguarding and operation of their service.

Safeguarding

Where safeguarding concerns are raised for a child in placement responsibility for the investigation of the incident falls to the Local Authority Designated Officer (LADO), the Independent Reviewing Officer (IRO) and social worker (SW) for the child, alongside the Placements team who will investigate any allegation or complaint and take appropriate action. This may involve removing the child to another provision if complaints, allegations or concerns are substantiated.

In the past year there have been no complaints received with respect to the provision of the children's placements service, although in the past month a number of notifications have been received by the Authority for which the safeguarding procedures identified above have been initiated. To date there have been no incidents requiring a child or young person to be moved from their placement due to safeguarding concerns.

15/12/2014

| No. Contact 1107 Beverley Wilks 1107 Beverley Wilks 1108 Hayley Davies, Elaine
Clarke 1108 Hayley Davies, Elaine
Clarke 1109 Mandy Bayes, Elizabeth
Watson 1108 Sarah Clements, James
Williamson 1109 Joan Carby-Roye, Sabrine
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Nicola Noble (Director),
Nicola Noble (Director),
Mandy Hones (Manager),
Lipie Couling, Magda 107919 Nick Barker | Q1
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<u>May-14</u> | Standards of
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with respect and
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their care
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caring for people
safely &
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 | Previous CQC report | Comments People should be given the medicines they need when they nee them, and in a safe way (outcome 9) The service should have quality checking systems to manage ri |
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| Decembric Durant | 16/05/2014 | 29/09/2014 | 17/11/2014 | |

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Angelina Care	ing Company	мн	PF/EMI	Q1	Q2	ເNG VISITS	Q4	No of LBB placed SU's (1st Dec 12)	No of LBB placed SU's (1st Nov 13)	LBB SU's sc 14)				te of last		Standards of	Standards of providing care,	N SUMMARY OF FI		
Angelina Care	ing Company	of Care		Q1	Q2	ğ	Δ4	No of LBB placed SU's (1st Dec 12)	of LBB ted SU's Nov 13)	LBB I SU's ec 14)				te of last		Standards of	providing care,			
									No o plac (1st	No of LBB placed SU's (1st Dec 14)	Total number of beds	LBB % of total		CQC spection		treating people with respect and involving them in their care	treatment & support which meets people's needs	caring for people safely & protecting them from harm	Standards of staffing	Standards of managem nt
														rom Oct 2014 nwards:	Overall Rating:	Is the Service Safe?	Is the Service Effective?	Is the Service Caring?	Is the Service Responsive ?	Is the Service well-led?
Antokol Polish	h Citizen's Committee	OP Resi/N				x (YA)								Aug-13			Х			х
			PF/EMI		25/07/14			3	4	2	34	5.9%	1	<u> May-13</u>						
														<u>Oct-14</u>						
Archers Point Indepen		OP Resi	PF/EMI		08/09/14		x	10	10	7	24	29.2%				Х	Х			Х
Ashcroft Care Pi	Providers (UK) Ltd	OP Nursing	PF			26/11/14		2	1	1	22	4.5%		<u>Jan-14</u> Jun-14						X
Ashglade Chisleh	ehurst Care	OP Resi	PF	13/06/14		24/10/14		1	2	0	15	0.0%					Х			Х
Ashling Lodge Chisleh		OP Resi	PF	-	14/08/14		X	3	2	1	13	7.7%		<u>Nov-13</u>						
Beechmore Court Cedarm	rmore Housing Assoc	OP Resi	PF/EMI				x	13	9	9	36	25.0%		<u>Sep-14</u>						
			55	10/00/11					10	10		05.00/		<u>Jul-14</u>					v	
		OP Nursing		19/06/14	01/08/14	16/10/14	x	19 8	10 5	10 3	40	25.0%		Aug-13					X	
Bromley Park Dementia Nursing Home Nellsar		OP Nursing	EMI	15/07/14		x		10	8	6	50	12.0%		<u>Jan-14</u>					Х	
Burrell Mead MHA	(OP Resi	PF	-	30/07/14			3	3	3	22	13.6%		<u>Apr-13</u>						
Burrows House Viridian	an (OP Resi	PF/EMI	11/04/14		x		35	35	33	54	61.1%		<u>Jun-14</u>						
Cabrini Childrens Society, 1 Healy Drive	ni Children's Society	LD				29/10/14		1	0	1	8	12.5%		<u>Jun-14</u>						
	ni Children's Society					20,10,14			0		0	12.0 /0		<u>Jun-14</u>						
Drive		LD				04/11/14		0	1	0	8	0.0%		Nov 12						
	grange Ltd (OP Nursing OP Nursing	PF PF/EMI	11/07/14		x	x	4	3 6	1 5	30 68	3.3% 7.4%		Nov-13 Dec-13						
Community Options Ltd 56 High St		MH				x (YA)	^	9	10	10	10	100.0%		May-13						1
Community Options Ltd 73 Repton Road		MH				x (YA)		5	5	4	5	80.0%		<u>May-13</u>						

andards of anageme nt	Previous CQV Score	Comments
Is the Service ell-led?		
х		
x	01/07/2014 1 grey cross 4 red crosses	Before people are given any examination, care, treatment or support, they should be asked if they agree to it (outcome 2) People should get safe and appropriate care that meets their needs and supports their rights (outcome 4) The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care (outcome 16)
Х		
х	Jan 14 3 ticks 2 grey crosses	People should be cared for in a clean environment and protected from the risk of infection (outcome 8) People should be cared for in safe and accessible surroundings that support their health and welfare (outcome 10) The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care (outcome 16)
	Sep 13 3 ticks, 2 grey crosses	Staff should be properly trained and supervised, and have
	July 13 5 ticks	the chance to develop and improve their skills (outcome 14)
		Improvements Required: There should be enough members of staff to keep people safe and meet their health and welfare needs (outcome 13)
	Dec 13 4 ticks 1 grey cross	
	June 13 5 ticks	
	June 13 5 ticks	

HOMES WITH CURRENT				DATES OF LB		ISITS										CQC INSPECTION SUMMARY OF FINDINGS				
Community Options Ltd, 33 Albermarle Road		мн			× (1			7	7	7	7	100.0%	Ju	<u>n-13</u>						
Community Options Ltd, 4 Sandford Road		мн				YA)		4	4	5	5	100.0%	<u></u>	<u>ct-13</u>						
								4	4	5	5	100.0%	Au	<u>ıg-13</u>	Good Dec 14	Good	Good	Outstanding	Good	Good
Community Options Ltd, 78 Croydon Road		мн			× (`	YA)	x (YA)	7	7	7	7	100.0%								
Community Options Ltd, Wheathill Road, 19		мн			× (`	YA)		5	4	5	5	100.0%	No	<u>ov-13</u>						
Elmstead	BUPA	OP Resi F	PF/EMI				x	16	13	9	49	18.4%	Ma	ay-14						
Elmwood	Mission Care	OP Nursing	PF	27/06/14	17/09/14	x	x	23	21	33	67	49.3%	Au	<u>ig-13</u>						
Eversleigh Residential Care Home	CNV	OP Resi	PF	23/06/14	09/09/14		x	5	6	6	31	19.4%	Ma	<u>ay-14</u>						
Fairlight and Fallowfield	Mills Group	OP Resi/N	PF				x	6	6	5	68	7.4%	Jai	<u>n-14</u>						
Fairmount	Independent	OP Resi F	PF/EMI				x	4	5	6	38	15.8%		<u>n-14</u>						
Florence Nursing Home	Independent	OP Nursing	PF	20/06/14				13	15	8	30	26.7%	Ja	<u>n-14</u>						
Foxbridge Court	Care UK	OP Nursing		27/05/14	10/1	1/14		n/a	3	3	84	3.6%	<u></u>	<u>2t-14</u>			x	x	x	x
Glebe Court	Glebe Housing Associa	ation OP Nursing	PF		22/09/14		x	2	1	1	47	2.1%	Se	p-13			х			
Que est ill	Mission Oper	OP Nursing F		00/05/44								40.00/	Se	<u>p-14</u>						
Greenhill Heatherwood	Mission Care Mills Group			30/05/14		x		31	33	30	64	46.9%	No	<u>ov-13</u>						
		OP Resi	PF		() () () () () () () () () ()	x		2	1	0	8	0.0%		or-14				X		-
Homefield	Mission Care	OP Nursing	EMI	30/06/14	27/1	0/14	x	23	19	15	42	35.7%								
Homelands	Independent	OP Resi	EMI	12/06/14				6	4	3	12	25.0%	Au	ı <u>q-14</u>						
					01/00/44	,							Δρ	<u>or-14</u>			x	x		x
Jansondean Lauriston House	Sage Minster / Larchwood	OP Nursing OP Nursing	PF PF	15/05/14 02/06/14	01/09/14 28/1	x 1/14	x	8	12 7	9 5	26 64	34.6% 7.8%	De	ec-13			^	^		
Maple House	Leonard Cheshire	LD			18/09/14			1	1	0	5	0.0%	Ар	<u>or-14</u>						
								2	1		22	4.5%	De	<u>ec-13</u>						Х

bo		
	5 ticks	
	Jul 13 4 ticks, 1 grey cross	
	June 13 5 ticks	
		People should get safe and appropriate care that meets their needs and supports their rights (outcome 4)
		People should be protected from abuse and staff should respect their human rights (outcome 7) People should be given the medicines they need when they
		need them, and in a safe way (outcome 9) Staff should be properly trained and supervised, and have
		the chance to develop and improve their skills (outcome 14) The service should tell CQC about important events that
		might affect the health, welfare and safety of people who receive care (outcome 20)
	Aug 2014 5	
(ticks	Improvements required: People should get safe and
		appropriate care that meets their needs and supports their rights (outcome 4)
	Sep 13 5 ticks	Decels should be seed for is onformed economists surroundings
		People should be cared for in safe and accessible surroundings that support their health and welfare (outcome 10)
	May 13 4 ticks,	
	1 grey cross	
	May 14 4 ticks, 1 grey cross	
		People should get safe and appropriate care that meets their needs and supports their rights (outcome 4)
		People should be given the medicines they need when they need them, and in a safe way (outcome 9) The service should have quality checking systems to
		manage risks and assure the health, welfare and safety of people who receive care (outcome 16)
(Jan 2014 5 grey crosses	People's personal records, including medical records, should be accurate and kept safe and confidential (outcome 21)
	Dec 13 4ticks,	
	1 grey cross	
(People's personal records, including medical records, should be accurate and kept safe and confidential (outcome 21)

HOMES WITH CURRENT																
SUSPENSIONS			DATES OF LI	3B MONITORING VISITS									CQC INSPECTIC	ON SUMMARY OF FI	INDINGS	
Oatlands	Independent	OP Resi EMI	13/05/14			29	25	25	56	44.6%	<u>Aug-13</u>					
Oatleigh	Independent	OP Nursing EMI	18/06/14			16	14	11	56	19.6%	Dec-13					
Park Avenue	Excelcare Holdings	OP Nursing PF/EMI		30/09/14		18	20	16	51	31.4%	Apr-14					
Parkside (Thicket Road, 79)	Leonard Cheshire	LD	09/07/14		x	8	5	4	7	57.1%	<u>May-13</u>					
											<u>Aug-14</u>					
Prince George Duke of Kent Court	Royal Masonic Benevoler	nt OP Nursing PF		19/09/14		7	8	4	78	5.1%			х		Х	
Queen Elizabeth House	Greensleeves Homes Tru	us OP Resi PF		25/11/14		2	1	1	28	3.6%	Dec-13					
Queen Mary House	Schoolmistresses & Gove	er OP Resi PF			x	0	1	1	36	2.8%	<u>Nov-13</u>					
Rosecroft	CNV	OP Resi PF/EMI	16/06/14	27/08/14	x	4	3	1	20	5.0%	<u>Aug-13</u>					
											0+11					
Rowena	Independent	OP Resi EMI		31/07/14		9	12	9	22	40.9%	<u>Oct-14</u>			х		
Springfield	Leonard Cheshire	PD		24/09/14		3	0	0	11	0.0%	<u>May-13</u>					
St Cecilia's	Leonard Cheshire	PD Nursing		28/11/14		11	10	4	30	13.3%	<u>Oct-13</u>					
											<u>Jan-14</u>					
St Raphael's	МНА	OP Nursing PF		29/09/14		21	21	20	58	34.5%						
											hum 12					
Sundridge Court	Caring Homes Group	OP Nursing PF	08/07/14	07/09/14 28/10/14		5	6	4	30	13.3%	<u>Jun-13</u>					
Tanglewood											<u>Nov-13</u>					
	Totem Care	LD			x	0	0	0	6	0.0%						
The Haven	Independent	OP Resi		x		3	4	4	6	66.7%	Jun-13					
											<u>Jun-13</u>					
The life offerer	la deve en devet			05/00/44					40	00.40	<u>Jun-13</u>					
The Heathers	Independent	OP Resi PF/EMI		05/08/14		1	3	3	13	23.1%						
											<u>Oct-13</u>					
The Old Manse	HFT	LD			x	1	1	2	8	25.0%		Х			Х	
The Sloane	Chislehurst Care	OP Nursing PF		x		1	4	4	27	14.8%	<u>Sep-13</u>					
Whitehouse	Independent	OP Resi PF	Ho	ome closed September 20 ⁷	14	1	1	0	3	0.0%	Apr-14					
	· · · · · · · · · · · · · · · · · · ·															
Whiteoak Court	Independent	OP Nursing PF		01/08/14		3	4	2	27	7.4%	<u>Nov-14</u>					
Widmore Road (Respite Service)	independent				x			_		,0	Jul-13					
Willett House	Mission Care	OP Nursing EMI	01/07/14	x		12	13	15	35	42.9%	<u>Nov-13</u>					
Woodham House	Independent	МН		x (YA)		3	5	8	9	88.9%	Apr-13					
Private Hospital Service:																
Filvate nospital Service.																
The London Autistic Spectrum Condition Centre	Glen Care	LD/MH				0	0	0		0.0%	<u>Jul-13</u>	Х	Х		Х	Х
											L					
Commented Linds as																
Supported Living: Burgess Autistic Trust - Head Office											Jan-14					
BAT - Burgess House		LD		12/12/14									l		-I	l
BAT - Hamilton House BAT - Northernhay		LD LD		<u> </u>								Regis	stered at head office	e above		
MCCH - Head Office		LD									<u>Mar-13</u>					
MCCH - Lancaster House		LD		03/09/14												
MCCH - Coppice, Spinney, Glade		LD		27/08/14								Regis	stered at head office	e above		
MCCH - 109 Masons Hill		LD		20/08/14		_										
Sunnyside - Head Office		LD									<u>Mar-13</u>					
Sunnyside - Dunstonian Court		LD		29/11/14								Regis	stered at head office	e above		
Certitude - Head Office		LD									Dec-13					
	1	1		1 1	1			1	1	1		1	1	1	1	ı

April 13 5 ticks	
March 13 5 ticks	People should get safe and appropriate care that meets their needs and supports their rights (outcome 4) There should be enough members of staff to keep people safe and meet their health and welfare needs (outcome 13)
May 14 4 ticks 1 grey cross	People should be cared for in safe and accessible surroundings that support their health and welfare (outcome 10)
Dec 13 4 tiicks, 1 grey cross	
	Before people are given any examination, care, treatment or support, they should be asked if they agree to it (outcome 2), Staff should be properly trained and supervised, and have the chance to develop and improve their skills (outcome 14)
Dec 13 2 ticks 3 grey crosses	
July 14 4 ticks 1 grey cross	
	Improvements required: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run (outcome 1). People should get safe and appropriate care that meets their needs and supports their rights (outcome 4). There should be enough members of staff to keep people safe and meet their health and welfare needs (outcome 13). Staff should be properly trained and supervised, and have the chance to develop and improve their skills (outcome 14). People's personal records, including medical records, should be accurate and kept safe and confidential (outcome 21)

HOMES WITH CURRENT									_												
SUSPENSIONS			D/	ATES OF LE	B MONITO	RING VISITS	1	_									CQC INSPECTIO	N SUMMARY OF FINDINGS			
Certitude - Devonshire Road		LD	_																		
Certitude - 173 Crofton Road		LD	_													Regist	tered at head office	above			
Certitude - 182 Crofton Road		LD																			
Avenues Head Office		LD	_					_						<u>Jul-13</u>							
Avenues - Swingfield Court		LD			18/06/14	1															
Avenues - 213 Widmore Road		LD	_		09/07/14	4															
Avenues - Amplio House		LD	_		16/07/14	1		_													
Avenues - The Elms		LD														Regist	Registered at head office above				
Avenues - Brosse Way		LD																			
Avenues - Century Way 18 -19		LD				06/11/14															
Avenues - Hillcrest		LD																			
														<u>Nov-13</u>							
Orchard Grove	LBB	LD					x		1	3	4	75.0%						Х			
St Blaise	LBB	LD					x		4	5	5	100.0%		Dec-13							
Outward - Head Office													_	<u>Sep-13</u>							
Outward - Padua Road		LD			22/10/14	1							_			Regist	tered at head office	above			
Outward - Bromley Road		LD						_					_		1	rtogio		45070			
CMG - 111 Masons Hill		LD				03/12/14								<u>Jun-14</u>							
Sanctuary - Johnston Court		LD	_		29/10/14								-	Dec-13							
					20,10,1								-								
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				21	24	33	21										All areas of this st	tandard are being met.			
																Х		dard in this area was not being me	et when we		
								_									last checked and	CQC required improvements.			
								-								X	At least one stand	dard in this area was not being me	t when we		
								-								^		CQC has aken enforcement action			
																Disala					
								-	<u> </u>							Blank Homes without ticks or crosses have not yet been inspected by the CQC (or report not yet published) since last star rating.					

		People should be given the medicines they need when they need
		them, and in a safe way (outcome 9)
	first inspection	
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Agenda Item 8a

Report No. CS14078	I	ondon Borough of I	3romley	
0014070		PART ONE - PUBI	-IC	
Decision Maker:	Executive			
Date:		Scrutiny by the Care Se tee on Wednesday 21 Ja	,	nent and
Decision Type:	Non-Urgent	Executive	Key	
Title:	CHILDREN'S S STRATEGY	OCIAL CARE RECR	UITMENT & RETEN	ΓΙΟΝ
Contact Officer:	Kay Weiss, Assista	ant Director Safeguarding	and Social Care	

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

E-mail: kay.weiss@bromley.gov.uk

Ward: (All Wards);

1. Reason for report

On 3 February 2010 the Executive agreed a package of measures to support better recruitment and retention of children's social workers.

The main aims of the recruitment and retention (R&R) strategy are to:

- Increase the recruitment of qualified Social Workers
- Decrease the number of qualified Social Workers leaving the Council and
- Reduce the dependency and costs incurred through engaging Agency Workers

On 20 November 2013 Executive agreed a one year extension to the current Recruitment and Retention strategy for the 2014/15 financial year. Due to the current employment market for children's social workers it is essential that consideration is given to the continuing appropriateness and effectiveness of the strategy going forward.

2. RECOMMENDATION(S)

The Care Services Policy Development and Scrutiny Committee is asked to consider and comment on the report and to make recommendations on the following:

- Recommend the current scheme is extended for the 2015/16 and 2016/17 financial years by utilising the residual funding from the LAA reward grant from the agreed recruitment and retention package for 2010-2014.
- Comment on the proposed enhancements to current package as set out in Appendix B.

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: Estimated Cost Recruitment and Retention budget LAA grant- £817,200 over the four year period 2010/11 to 2013/14. Circa £596,000 remaining.
- 2. Ongoing costs: Recurring Cost
- 3. Budget head/performance centre: Children's Social Care Division
- 4. Total current budget for this head: £
- 5. Source of funding:

<u>Staff</u>

- 1. Number of staff (current and additional): 156
- 2. If from existing staff resources, number of staff hours:

<u>Legal</u>

- 1. Legal Requirement: Statutory Requirement The Children Act 1989 as amended
- 2. Call-in: Applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Not Applicable

Ward Councillor Views

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

3. COMMENTARY

3.1 On a national level children's social work continues to be recognised as a key shortage recruitment area within local government and competition to attract the best of a scarce resource remains high. Furthermore, competition between neighbouring London Boroughs and Local Authorities has prompted a number of Councils to review and update their remuneration packages.

Salary benchmarking

- **3.2** The main focus of the recruitment and retention strategy for children's' social care is designed to build and maintain an appropriately skilled professional workforce within two key front line teams Referral & Assessment Team (RAT) and Safeguarding & Care Planning Team (SGCP). Other elements of the R&R strategy seek to ensure that Bromley remains competitive in the market place as well as being seen as an attractive employer to join.
- **3.3** The most recent benchmarking data the Council has undertaken focused on the frontline teams (Appendix A). The data shows that whilst Bromley salaries remain competitive it would fall far behind its neighbouring Councils if the R&R package was removed.
- **3.4** In November 2014 the Council participated in a London wide salary survey for Children's Social Care led by the London Borough of Haringey on behalf of London Councils. The results of this extensive survey are expected to be circulated in January 2014 and will give the greatest indication yet of how competitive Bromley's salary package is compared with other London Boroughs.

Vacancy Rates

		2013/2014			2014/2015		
Section	Team	Q1	Q2	Q3	Q4	Q1	Q2
		Apr-Jun 30.06.2013	Jul-Sep 30.09.2013	Oct-Dec 31.12.2013	Jan-Mar 31.03.2014	Apr-Jun 30.06.2014	Jul-Sep 30.09.2014
Care & Resources	16+, Leaving Care & USAC Service	12.71%	4.24%	4.24%	4.24%	4.24%	12.71%
	Family Placements	3.71%	7.42%	22.61%	16.43%	19.78%	23.15%
	Looked After Children Service	13.87%	13.87%	13.87%	21.17%	21.17%	13.87%
Quality Assurance & Child Protection	Quality Assurance Service	0.00%	0.00%	35.06%	18.12%	8.73%	32.10%
Referral & Assessment	Common Assessment Framework	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Emergency Duty Team	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	Referral & Assessment Team	24.00%	19.96%	3.99%	11.98%	11.81%	15.74%
	Teenage & Parent Support Service	14.51%	14.51%	25.35%	25.35%	25.35%	20.22%

3.5 The table below shows the vacancy rates for qualified Social Care staff across the Division:

Safeguarding & Care Planning	Safeguarding/Care Planning (East)	29.63%	19.23%	16.00%	28.00%	33.33%	12.00%
	Safeguarding/Care Planning (West)	27.27%	22.73%	26.09%	21.74%	20.83%	28.57%
	Children's Disability / Social Work & Short Breaks Team	17.27%	17.27%	17.27%	31.80%	23.85%	31.80%
Youth Support Services	Youth Offending Service	5.62%	5.96%	11.92%	23.84%	25.35%	32.72%

The majority of non frontline teams have been stable and have had no significant difficulties recruiting to most posts. However, isolated recruitment difficulties do exist, there has been significant difficulty recruiting to Deputy Manager posts in Fostering and Adoption and the Children's Disability & Short Breaks team over the past 18 months despite efforts to recruit both externally and internally and through the use of Employment Agencies.

Youth Offending Service

- 3.6 During the past twelve months there have been significant difficulties recruiting to Senior YOT Officer positions and YOT Operations Managers. As indicated in the table shown in 3.4 the vacancy rate currently stands at 33%. Benchmarking is currently being undertaken on YOT salaries.
- 3.7 Other Local Authorities have adopted the Bromley model of recruiting qualified YOT Officers into posts previously held by unqualified staff in a bid to raise standards. This is impacting on the pool of available qualified YOT staff the Council can recruit to as Social Work qualified Youth Offending Officers are currently at a premium across London.

Starters and Leavers Frontline Teams

3.8 The chart given below shows the impact of the recruitment and retention strategy on the number of starters and leavers in the RAT and SGCP teams before and after it was introduced in 2010.

	Financial Year	Total Starters	Total Leavers	Net Effect
	2009/10	17	18	-1
1	2010/11	22	17	+5
Post introduction	2011/12	20	11	+9
of the R&R strategy	2012/13	11	17	-6
	2013/14	24	16	+8
	2014/15 to 31/10/14	18	11	+7

3.9 Whilst in broad terms more staff are being recruited into posts than are leaving there are still significant vacancies in these two teams. There has also been a significant increase in the number of newly qualified Social Workers recruited through both the Step Up to Social programme in 2013 and through a direct recruitment campaign in 2014. Whilst it is positive for Bromley to employ newly qualified Social Workers with a view to retaining them as they become more experienced it is remaining problematic recruiting sufficient numbers of more experienced Senior Practitioners.

3.10 The chart given below shows the numbers of Senior Practitioner starters and leavers in the RAT and SGCP teams before and during the implementation of the recruitment and retention strategy.

	Financial Year	Total Starters	Total Leavers	Net Effect
	2009/10	3	7	-4
Post introduction of the R&R strategy	2010/11	12	3	+9
	2011/12	7	7	0
	2012/13	3	10	-7
	2013/14	7	3	+4
ļ	2014/15	0	7	-7

Retention / Exit Data

- **3.11** Exit interviews are carried out with all qualified staff leaving both the front line teams and all teams in the division. These provide an insight into how people feel about the working environment. The issues that leavers wish to discuss with HR are personally driven; however, care is taken to touch on the key elements of our recruitment strategy; remuneration, management & supervision and support, and personal/career development.
- 3.12 In the vast majority of cases there is not a single reason why social workers leave the Council. It is usually an amalgamation of reasons which make it difficult to identify a single overriding reason or trend that the Council can address, thereby reducing the number of leavers with ease.
- **3.13** From the information collected on leaver's destinations, the significant and most commonly recurring destinations stated are relocation, joining a London Borough or Local Authority and joining an Employment Agency to work as a Locum.

Agency Spend

3.14 One of the main aims of the introduction of the recruitment & retention strategy was to reduce the dependency and costs incurred through engaging Locum/Agency staff. The chart below shows the spend on qualified Locum/Agency staff before and during the introduction of the R&R Strategy.

	2009-10	2010-11	2011-12	2012-13	2013-14
All Teams	1,784,747.29	1,890,909.93	1,087,718.40	1,067,307.86	1,329,110.00
Front Line Teams	1,284,633.99	1,401,462.21	765,209.75	713,740.51	837,870.00

3.15 Overall the spend on Locum/Agency staff has decreased since 2010/11. The figure did rise in 2013/14 on the previous year but it is important to note that the Children's Disability Service joined the Children's Social Care Division from the Education Division during this year. It is also important to note that the number of qualified establishment posts has risen from 109 posts as at 31 March 2010 to 130 as at 30 November 2014.

4. Officer Steering Group Recommendations

- **4.1** In response to the continuing recruitment and retention difficulties facing different teams within the Children's Social Care division an officer steering group was set up in August 2014 consisting of Heads of Service, managers and staff from the division as well as colleagues from Human Resources and Finance.
- **4.2** The steering group was tasked to review the current package identifying any areas which were hindering the ability to recruit and retain staff across the division and formulate a new look 'fit for purpose' package. (See Appendix B for a full summary of recommendations, elements that have changed or are new are highlighted in yellow). The key recommendations by the steering group are listed below.

4.2.1 Annual Retention Supplement

It is recommended that all current and newly recruited Social Workers should continue to receive the £1,500 annual retention supplement with the exception of newly recruited Social Workers in the Fostering and Adoption teams. These two teams have remained stable and it is viewed that there are no difficulties in recruiting to these roles. Staff already working in these teams who receive this payment will continue to do so. Due to the difficulties recruiting Deputy Managers into Fostering and Adoption and to the Senior Practitioner post based in Housing it is recommended that these posts should now be eligible to receive the £1,500 annual retention supplement.

As highlighted in 3.4 the high vacancy levels amongst Senior YOT Officers and the YOT Operational Managers it is recommended that the annual retention supplement should also be applied to these posts.

To encourage promotion and career opportunities for Social Workers in the non front-line teams it was recommended that the retention supplement should not cease when someone is promoted to a Senior Practitioner or Deputy Manager role.

4.2.2 Market Supplement Increments

The steering group agreed that due to the continuing recruitment difficulties and the demands of the work carried out by the two front line teams that Social Workers, Senior Practitioners and Deputy Managers should continue to receive the additional market supplement increments so that the differential with other teams remains.

4.2.3 Golden Hello and Finder's Fee

The steering group recommended that new employees joining the Council from outside the organisation should continue to receive the £1,000 Golden Hello with the exception of newly qualified Social Workers.

Due to the difficulty in recruiting experienced Senior Practitioners and Deputy Managers to the front line teams from outside the Council it is recommend that the Golden Hello payment is increased to £2,000. To encourage existing staff to move into a frontline post within the Council from a non-front line team it is recommended that a £1,000 Golden Hello payment is made.

As take up of the Finder's Fee has been extremely low since the introduction of the R&R Strategy it is recommended to increase the amount to £500. The group felt it was important to further publicise the Finder's Fee scheme to all staff across the Council.

4.2.4 Additional Annual Leave

It was acknowledged by the group that staff in the two front line teams regularly work additional hours and struggle to find the time to take the time off that is owed to them as time in lieu. The steering group recommended to reward staff in these teams an additional three days annual leave. It was felt that when planned far enough in advance it is easier to plan additional annual leave rather than taking time off in lieu at short notice.

4.2.5 Continuous professional development / career pathway

As a way of strengthening the retention of key members of staff and identifying talent within the division the Workforce Development team in consultation with the steering group have devised two new programmes for staff:

<u>Senior Practitioner Progression Pathway (S3P)</u> The S3P is a programme designed with the aim to develop Social Workers with the capabilities and competence to progress to Senior Practitioner level, participants are required to hold a minimum of 18 months post qualification experience. The scheme will identify and progress experienced talented staff at a faster rate, this structured programme should positively impact on the likelihood of retaining this key group of staff. The programme will consist of a mixture of academic and on the job activities. Once successfully completed, participants will be eligible to move into a Senior Practitioner post.

<u>Continuous Professional Development Plan.</u> This is a structured plan of training courses for qualified staff as well as on the job activities directly linked to the Professional Capabilities Framework (PCF). In order to ensure our social work staff are exposed to the relevant development opportunities required to successfully function at each PCF level. In addition, there is also a Continuous Professional Development Plan for non-qualified social work support staff.

These two new programmes will serve as a viable means of ensuring that financial incentives are not the only solutions being proposed to solve the recruitment and retention challenges facing the Children's Social Care Division.

4.2.6 Management Support/Supervision and Staff Reward

It was agreed to continue to look at ways to strengthen the best practice processes which already exist within the division by ensuring that staff have regular supervision, appraisals, are well inducted and that caseload levels continue to be monitored. It was agreed that a recent pilot should be extended to ensure that staff have regular access in communicating with the Assistant Director and Heads of Service to raise any issues they have and make recommendations for service improvements.

The group felt that there is also scope to improve celebrating the success of staff across the division.

4.2.7 Recruitment process

One of the issues identified by the group was the time it takes for a potential applicant to apply for a post and be offered an interview, due to the highly competitive job market for qualified Social Workers it was agreed that a faster more streamlined process was needed for applicants to apply and be offered an interview. As a direct result of the steering group a new improved application process has been put in place for both direct and agency applicants with a commitment from managers to provide same day feedback and/or interview offers to candidates.

5. Conclusion

5.1 It is clear, from the salary benchmarking (Appendix A) that Bromley needs to have an enhanced employment package to retain its profile in the job market for qualified social workers. If the package was removed Bromley salaries would not be competitive in relation to neighbouring London Boroughs and Local Authorities.

6. **RECOMMENDATIONS**

- 6.1 The Care Services Policy Development and Scrutiny Committee is asked to consider and comment on the report and to make recommendations on the following:
 - Recommend the current scheme is extended for the 2015/16 and 2016/17 financial years by utilising the residual funding LAA reward grant from the agreed recruitment and retention package for 2010-2014.
 - Comment on the proposed enhancements to the current package as set out in Appendix B.

7 POLICY IMPLICATIONS

7.1 The Authority is responsible for providing a statutory social work service to vulnerable children and to safeguard them from harm. This is delivered within a performance framework subject to external inspection. One such inspection identified the positive impact of the Council's recruitment and retention strategy.

8 FINANCIAL IMPLICATIONS

8.1 The costs of the recruitment and retention strategy was calculated over a four year period from 2010 – 2014, the total net cost was £817,200 funded from the LAA reward grant. This was based on a total cost of £1,202,000 less the savings based on the average difference in the costs of employing permanent staff compared with agency locums.

The table given below sets out the actual spend during 1 April 2010 – 31 March 2014.

Retention Element	2010/11	2011/12	2012/13	2013/14
Golden Hellos	£28,000	£18,795	£20,048	£23,750
Annual retention supplement	£73,042.33	£104,842.00	£126,367.00	£109,036.56
Finder's fee	£0	£0	£0	£625
Market premium - extended salary scales	£44,526.50	£56,130.00	£31,654.00	£47,061.73
Annual Total	£145,568.83	£179,767.00	£178,069.00	£180,473.29
Total spend		£683,8	78.12	

Additional Costs

- **8.2** By enhancing the Recruitment and Retention package with the recommendations set out under section 4.1 of this report the additional anticipated annual costs are between £35,000 £45,000 per annum. It is not possible to give an exact figure as the amount will be dependent of the number of staff recruited and retained across the division over the next two and a half years.
- **8.3** From the original budget of £817,200 there is £597k remaining. Some elements of the recruitment and retention package were paid from underspends within the Division since 2011/12. Therefore there is budget available to fund the package during the current financial year as well as the 2015/16 and 2016/17 financial years.
- 8.4 Once the funding available has been exhausted the recruitment and retention package will need to be reconsidered. For this to continue beyond 2016/17, funding will have to be found from within existing resources or growth agreed.

9 LEGAL IMPLICATIONS

9.1 The duty to safeguard and protect children and the legal procedures and orders available to ensure protection are contained in the Children Act 1989 as amended.

10 PERSONNEL IMPLICATIONS

- **10.1** It is essential to establishing a stable workforce in the front line teams that the Council is able to offer a competitive employment package. Considerable headway has been made in recruitment and this is now beginning to be reflected in retention rates. However the employment market for experienced qualified children's social workers remains volatile.
- **10.2** Whilst the focus of this report is on how the recruitment and retention strategy had impacted on the two front line teams, there are other issues arising from its implementation. These relate to the impact on those who do not receive the benefits of the strategy and their concerns as to how their services are valued; there are also concerns about how the difference in salary levels between practitioners and deputy/group managers has been eroded by the payment of market premium and the retention supplement.
- **10.3** Going forward it will be important to ensure that the strategy stays in step with any developments that are made as a result of the national work on the career and grading structure of the social care profession.

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

Sala	ry ranges ex	cluding addi	tional supp	lementary/ret	ention paym	ents		
				··· · ·			_	
Minimum Sa				Maximum Sa			м	
Social Work	er	A.I		Social Work	er	0.1. D'f	So	эc
Council	Salary	Salary Dif		Council	Salary	Salary Dif		С
	000 070 00	to LBB		A	040.007.00	to LBB		
Croydon	£32,079.00	£2,121.00		Croydon	£42,027.00	£6,183.00		
Lewisham	£32,253.00	£2,295.00		Southwark	£39,120.00	£3,276.00		
Bromley	£29,958.00	£0.00		Greenwich	£36,669.00	£825.00		
Southwark	£29,868.00	-£90.00		Kent	£36,442.00	£598.00		
Greenwich	£27,498.00	-£2,460.00		Bromley	£35,844.00	£0.00 -£344.00	Be	
Surrey	£27,000.00	-£2,958.00		Surrey	£35,500.00			
Kent	£26,953.00	-£3,005.00		Lewisham	£35,406.00	-£438.00		
Bexley	£25,884.00	-£4,074.00		Bexley	£34,578.00	-£1,266.00	Su	Jri
Senior Pract	titioner			Senior Pract	titioner		Se	en
Council	Salary	Salary Dif to LBB		Council	Salary	Salary Dif to LBB		с
Lewisham	£37,329.00	£3,414.00		Southwark	£42,681.00	£4,152.00	Be	аx
Southwark	£36,456.00	£2,541.00		Surrey	£42,600.00	£4,071.00	Ke	en
Kent	£36,443.00	£2,528.00		Kent	£41,938.00	£3,409.00	Le	ew
Surrey	£35,501.00	£1,586.00		Bexley	£40,326.00	£1,797.00	So	อน
Bexley	£34,827.00	£912.00		Lewisham	£39,120.00	£591.00	Bi	ro
Bromley	£33,915.00	£0.00		Bromley	£38,529.00	£0.00	Su	uri
Greenwich	£32,079.00	-£1,836.00		Greenwich	£36,669.00	-£1,860.00	G	re
Croydon*	n/a	n/a		Croydon*	n/a	n/a	Cr	ro
Deputy Man	ager			Deputy Man	ager		De	er
Council	Salary	Salary Dif to LBB		Council	Salary	Salary Dif to LBB		с
Croydon	£42,027.00	£5,283.00		Bexley	£46.815.00	£5,610.00	Be	аx
Surrey	£42,601.00	£5,857.00		Surrey	£46,722.00	£5,517.00		
Bexley	£40,710.00	£3,966.00		Croydon	£43,803.00	£2,598.00		
Bromley	£36,744.00	£0.00		Southwark	£42,681.00	£1,476.00	Bi	
Southwark	£36,456.00	-£288.00		Bromley	£41,205.00	£0.00	So	
Kent**	n/a	n/a		Kent**	n/a	n/a	Ke	
Greenwich**	n/a	n/a		Greenwich**	n/a	n/a	G	
Lewisham**	n/a	n/a		Lewisham**	n/a	n/a	Le	
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* LB Croydon incoporate Senior Practitioner roles within the Social Worker job title ** LB Lewisham, Greenwich & Kent CC do not have comparable Deputy Manager roles

Salary	ranges inco	rporating ad	ditional sup	plementary/re	etention pay	nents
Minimum Sa	larv			Maximum S	alarv	
Social Work				Social Work		
Council	Salary	Salary Dif to LBB		Council	Salary	Salary Dif to LBB
Croydon	£32,079.00	£621.00		Croydon	£42,027.00	£4,683.00
Lewisham	£32,253.00	£795.00		Kent	£39,442.00	£2,098.00
Bromley	£31,458.00	£0.00		Southwark	£39,120.00	£1,776.00
Greenwich	£30,247.80	-£1,210.20		Bexley	£38,762.00	£1,418.00
Bexley	£30,068.00	-£1,390.00		Bromley	£37,344.00	£0.00
Kent	£29,953.00	-£1,505.00		Surrey	£35,500.00	-£1,844.00
Southwark	£29,868.00	-£1,590.00		Lewisham	£35,406.00	-£1,938.00
Surrey	£27,000.00	-£4,458.00		Greenwich	£33,762.30	-£3,581.70
Senior Pract	itioner			Senior Prac	titioner	
Council	Salary	Salary Dif to LBB		Council	Salary	Salary Di to LBB
Bexley	£39,011.00	£3,096.00		Bexley	£44,510.00	£2,241.00
Kent	£38,443.00	£2,528.00		Kent	£43,938.00	£1,669.00
Lewisham	£37,329.00	£1,414.00		Southwark	£42,681.00	£412.00
Southwark	£36,456.00	£541.00		Surrey	£42,600.00	£331.00
Bromley	£35,915.00	£0.00		Bromley	£42,269.00	£0.00
Surrey	£35,501.00	-£414.00		Greenwich	£40,335.90	-£1,933.10
Greenwich	£35,286.90	-£628.10		Lewisham	£39,120.00	-£3,149.00
Croydon*	n/a	n/a		Croydon*	n/a	n/a
Deputy Man	aqer			Deputy Man	ager	
Council	Salary	Salary Dif to LBB		Council	Salary	Salary Dif
Bexley	£44,894.00	£6,150.00		Bexley	£50,999.00	£4,277.00
Surrey	£42,601.00	£6,145.00		Surrey	£46,722.00	£2,919.00
Croydon	£42,027.00	£3,283.00		Bromley	£45.008.00	£0.00
Bromley	£38,744.00	£0.00		Crovdon	£43,803.00	-£1.205.0
Southwark	£36,456.00	-£2,288.00		Southwark	£42,681.00	-£1,122.0
Kent**	n/a	n/a		Kent**	n/a	n/a
Greenwich**	n/a	n/a		Greenwich**	n/a	n/a
Lewisham**	n/a	n/a		Lewisham**	n/a	n/a

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Retention Element	Who is Eligible?	Criteria Applied	When is it paid?
1. Annual Retention Supplement a) £1500	 a) (i) Employees who hold a 'social worker' post and are social work qualified and HCPC registered in the following teams: Leaving Care Looked After Children Multi-Disciplinary Adolescent Service Referral and Assessment Safeguarding and Care Planning Children with Disabilities Emergency Duty Team 	 All payments are made subject to: Satisfactory performance This means that the employee has not been through formal evidenced performance management procedures during the preceding year. Satisfactory attendance and sickness record Each case will be considered on its merits but generally this would be taken to mean that the employee has a good attendance record during the preceding year and has not met the absence threshold for formal management action. 	Payments are split into two and made bi- the 6 month and 12 month anniversary of employee's start date to their current post. Therefore, if an employee has been promo- the year, they will become eligible for the h supplement and will receive the first paym completing 6 months service and second p after completing 12 months in the new pos
	 (ii) Employees who hold a 'senior practitioner' or 'deputy manager' post and are social work qualified and HCPC registered in the following teams: Children with Disabilities Looked After Children Leaving Care 	The decision on who will receive the payment is made by the Assistant Director for the division (who may decide to delegate this), and each case is considered on its own merits e.g. disability related absences; maternity leave Payments are made pro-rata for part-time staff.	If an employee is promoted part-way throut to a post eligible for the retention supplem rata payment will be made for the part of the have completed in their eligible post, then promotion will be taken as the anniversary their year will begin again.
	 (iii) Employees who hold the following posts: Deputy Manager - Fostering Deputy Manager - Adoption Senior YOT Officer - Youth Offending Service Operations Manager - Youth Offending Service Senior Practitioner - Housing 		If an employee is promoted part-way throu into a post that is not eligible for a retention supplement, a pro-rata payment will be ma part of the year they have completed in the post.
b) £2000	 b) Employees who hold a 'senior practitioner' or 'deputy manager' post and are social work qualified and HCPC registered in the following teams: Referral and Assessment Safeguarding and Care Planning Emergency Duty Team 		
2. Market Supplement Increments	 a) Job title 'Social Worker' in the following teams: Referral and Assessment Safeguarding and Care Planning 		Existing employees automatically continue increment in April into the additional increr they reach the maximum spinal column po extended scale.
a) Extended Salary Scale by 2 additional increments	 b) Job title 'Senior Practitioner' and 'Deputy Manager' in the following teams: Referral and Assessment Safeguarding and Care Planning 		
b) Extended Salary Scale by 4 additional increments c) Extended Salary Scale by 3	c) Job title 'Child Protection Chair' and 'Independent Reviewing Officer' in the Quality Assurance Service.		
additional increments 3. Golden Hello £1000	 a) £1000 payment to all experienced social workers and senior practitioners (not newly qualified Social Workers) who take up a first appointment in LBB Children's Social Care division in a post that requires a social work qualification OR b) £2000 payment to all senior practitioners and deputy managers who take up a first appointment in LBB Children's Social Care division within Referral & Assessment or Safeguarding & Care Planning c) £1000 payment to all social workers, senior practitioners and deputy managers who move within LBB Children's Social Care division into a post within Referral & Assessment or Safeguarding & Care Planning 	The Golden Hello is recoverable in full: 1. If the employee resigns within the first six months of service 2. If the employee fails their probation period	 a) Paid automatically through payroll with salary payment b) Paid automatically through payroll with salary once they have moved team
	 Those not eligible: 'Grow Your Own' candidates who take up a qualified posts after completing degree sponsored by the Council Newly Qualified Social Workers 		
4. Finders Fee 589 90 0 137 7	 <u>Any</u> member of staff who introduces a person who is successfully recruited to a qualified social worker post in Bromley in one of the following teams: Adoption & Fostering Leaving Care Looked After Children Multi-Disciplinary Adolescent Service Referral and Assessment Safeguarding and Care Planning 	 Introducer to inform Head of Service CVs can be accepted in the first instance, with an application form to be completed at a later date Managers then notify HR that they will be interviewing a candidate under this provision. Managers interview in the normal way If appointed, the manager should confirm to HR that 'x' introduced 'y' HR issue the vouchers The vouchers are not recoverable if the recruit leaves. * The Finders Fee does not apply to managers who convert a locum in their team to a member of LBB staff 	Paid through vouchers to the value of £50 successful candidate starting employment Bromley and once HR has confirmation fro department of who introduced the candida Paid after the new starter successfully con months in post.
5. <mark>3 extra days annual leave per</mark> annum	Employees (up to and including Group Manager level) who hold a post requiring a social work qualification and HCPC registration within the following teams: Referral and Assessment Safeguarding and Care Planning	 The 3 days should be used between 1st April and 31st March of the following year Days cannot be rolled over from year to year Dates are to be subject to the needs of the service 	n/a

	Additional Cost
-annually on of the st.	£30,000
moted during e higher ment after d payment ost.	
ough the year ment, a pro- f the year they en the date of ary date, and	
ough the year ion made for the their eligible	With Senior YOT Officers included - £10,000
ue to ements until point of the	
h the first	Estimated £5,000 maximum
h the first	
500 upon the ent with from the date.	
ompletes six	

6. Lease Car Scheme	Available to all employees appointed in LBB Children's Social Care division in a post that requires a social work qualification. The lease cars are for a three year period and includes the cost of routine services, replacement of worn tyres, comprehensive insurance and breakdown assistance	 Appointments must be for a period of at least three years Must hold a valid driving licence 	n/a
 7. Continuous Professional Development Plans for: a) qualified social work staff b) non qualified social work 	A programme of training and practice expectations/development activities available for all eligible staff a) All employees who hold a post requiring a social work qualification within LBB Children's Social Care division at any grade level		n/a
b) non-qualified social work support staff	b) All support staff within LBB Children's Social Care division at any grade		
8. Senior Practitioner Progression Pathway With the aim to develop social workers with the capabilities and competence to progress from social workers into senior practitioners within/into a frontline team	Social workers with 18 months post qualifying experience in any social work team.	 Social workers can apply to join the progression pathway at minimum 18months post qualifying experience - all applications to be made to Senior Practitioner Progression Board for consideration (SPPPB) Pathway will last for a period of minimum 12 months A two year retention criteria will be applied to those successfully completing the pathway There are two different entry routes onto the pathway: Route 1 – if the social worker has at least 18 months frontline experience, they will enter onto a structured course programme and a structured plan of short secondments in a frontline team/s Route 2 – if the social worker has less than 18 months frontline experience, they will enter onto a structured course programme and a longer and more in depth structured plan of secondments in a frontline team/s 	n/a
9. Management Support / Supervision	 Appraisals Supervision Induction Maximum caseloads Bromley Learning Hub – creating direct access to Kay Weiss & Heads of Service 		
10. Celebration/ Reward of Social Work Staff	Recognition of staff success stories and contribution/going the extra mile. Format to be confirmed.		
11. Recruitment Process	 Streamlined application form for all social work vacancies Faster turnaround for shortlisting and interview process Quick turnaround of agency CV feedback 		

Appendix B – Proposed R&R Package 2015/16

Funded from existing budget Issue of backfill Transformation fund

Agenda Item 8b

Report No. CS14118

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker:	Executive		
Date:	Pre Decision Scrutiny Care Services Policy Development and Scrutiny Committee 21 st January 2015		
	11 th February 2015		
Decision Type:	Non-Urgent	Non-Executive	Non-Key
Title:	GATEWAY REPORT ON TENANCY SUSTAINMENT SERVICES FOR YOUNG PEOPLE		
Contact Officer:	Wendy Norman, Strategic Manager, Procurement and Contract Compliance Tel: 020 8313 4212 E-mail: wendy.norman@bromley.gov.uk		
Chief Officer:	Terry Parkin, Executive Director of Education, Care and Health Services Tel: 020 313 4030 E-mail: terry.parkin@bromley.gov.uk		
Ward:	Boroughwide		

1. Reason for report

1.1 This report reviews the provision of tenancy sustainment services to young people and makes recommendations for commissioning when the current contracts finish on 30th August 2015.

2. RECOMMENDATION(S)

Members are asked to agree:

- 2.1 that officers undertake a tendering exercise to procure a tenancy sustainment service for young people including those young people with higher support needs. The tender will require the provider to make arrangements for the provision of accommodation appropriate for the contract.
- 2.2 the contract period will be for 3 years from 31st August 2015 with the option to extend for a further 2 periods of 1 year each.
- 2.3 To delegate authority to the Chief Officer in consultation with the Portfolio Holder to award a short extension to the existing contract for up to 6 months if necessary.
- 2.4 to authorise Officers to use a negotiated procedure if procurement option (e) is preferred.

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: Estimated cost Current cost £438,870 per annum for One Support contract plus £1,307,000 (estimated) for semi independent placements
- 2. Ongoing costs: Recurring cost. £438,870 +£1,307,000
- 3. Budget head/performance centre: : 749000 -Supporting People Services ; 807110 Leaving Care Team; 826900 Unaccompanied Asylum Seeking Children
- 4. Total current budget for this head: £1,751,340 Supporting People; £690,980 Leaving Care Team: £320,730.00 Unaccompanied Asylum Seeking Children.
- 5. Source of funding: Revenue Support Grant

<u>Staff</u>

- 1. Number of staff (current and additional): LBB staff are engaged in contract monitoring and quality assurance of these services.
- 2. If from existing staff resources, number of staff hours: .25FTE

<u>Legal</u>

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

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 92 young people at any one time.

Ward Councillor Views

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

3. COMMENTARY

- 3.1 Tenancy support services are delivered by one Support to care leavers and to homeless young people aged 16 plus. The service is either delivered as part of the tenancy agreement for young people living in supported accommodation, or to young people placed in private accommodation or social housing. The young people accessing this service are not able to access the support service run by South London YMCA in Charles Darwin and Lewis King House as there is a lower age limit of 20 imposed for the YMCA services.
- 3.2 The support service provides support hours delivered as 1;1 or in groups during which staff assist young people to develop the life skills essential for sustaining a tenancy. This includes practical support with budgeting, paying for rent and bills, claiming benefits as well as support into education and training. The support service also provides overall management of the schemes and liaises with local agencies and police in order that the schemes maintain a reasonable profile in the neighbourhood.
- 3.3 There is not a statutory requirement to fund this service, however by providing the service the Council is able to meet its responsibilities to young people who are covered by the Southwark Judgement. This is a House of Lords ruling that every 16-17 year old presenting themselves as homeless to their local authority must have their needs assessed by their local children's services. If they are deemed to be a Child in Need they must be accommodated under Section 20 of the Children Act. For the Council this means that a 16 or 17 year old applying as homeless to their housing authority may fall under the Child in Need category and would be able to access a range of support owed to certain children 'looked after' by a local authority. The council funds a Senior Practitioner Social Worker post based in the Housing Support and Resettlement Team to undertake the assessment of 16 and 17 year olds and determine which services would best meet their needs. The tenancy support service provides an appropriate service for a significant proportion of those young people assessed and diverts many young people from becoming Looked After Children.
- 3.4 The annual value of the contracts is:

Supported Accommodation	£343,616 per annum
Floating Support	£ 95,255 per annum
Total	£ 438,871 per annum

These contract prices have been frozen since 2011.

3.5 The table below gives basic information about each supported accommodation scheme. The support levels H, M, L, (high, medium or low) refer to the average number of individual support hours provided in the schemes to each the young person each week.

Support provided by One Support	Number of units available	Support Level	Landlord
1-3 Anerley Station Road	8	H	Look Ahead
34 Thicket Road	7	Μ	Look Ahead
The Hub	6	L	Look Ahead
98 Wiverton Road	4	L	London & Quadrant
43 Stembridge Road	4	L	Casa Support (Amicus Horizon)

142 Croydon Road	5	М	Casa Support (Amicus Horizon)
4 Hawes Road	6	М	Casa Support (Amicus
(Teenage Parents)	0		Horizon)
11 Highland Road	5	М	A2 Dominion
Drake Court	14	М	A2 Dominion
TOTAL UNITS	59		

- 3.6 The Floating Support Service delivers 112 hours per week to young people living in independent tenancies in private or social housing. This service also supports teenage parents. One Support use their staff group flexibly across both services in order to achieve the best matches of staff and users. The outcomes achieved by young people leaving the floating support services are positive and are set out against the different targets in Appendix 1.
- 3.7 In addition to the contracts with One Support the Council funds spot placements in accommodation with more intensive support for young people whose needs cannot be met in the One Support schemes. There are no block contracts for these schemes. Unaccompanied minors directed to Bromley by the Home Office are also included in this group.
- 3.8 Expenditure for 53 young people placed in semi-independent accommodation in 14/15 is forecast to outturn at £1,307,000.

History of Contracts

- 3.9 Tenancy support schemes for young people were developed during the late 90s by a range of different support providers and housing associations. Officers amalgamated and re-tendered these contracts in 2011 in order to reduce duplicated costs across several providers and to increase efficiency in the service. This amalgamation resulted in annual savings in the contract value of £245k.
- 3.10 One Support won a two year contract for tenancy support to young people in 2011 which had an option to extend for 2 periods of 1 year each. Both extensions have been taken up after consideration of a gateway report by the Executive.
- 3.11 The current contract with One Support expires on 30th August 2015 and there are no further extensions available.
- 3.12 The implementation of the current contract was complex as the new provider had to enter into 4 agreements with 4 different landlords, all of whom run slightly different arrangements. If the service is retendered and another provider is successful this exercise will have to be repeated. We would estimate that the implementation of the new contract could take 9 months to a year.

Contractor's Performance

- 3.13 Officers meet with One Support regularly in order to ensure that the service is utilised efficiently and that key performance indicators are being met.
- 3.14 Overall the Contractor's performance is satisfactory. Appendix 1 details performance since the beginning of the contract against KPIs and the outcomes that young people identify through their support sessions.
- 3.15 One Support are working pro-actively with their staff to ensure that the service is led by the motivated staff who can respond to the fluctuating needs of the users. They are also stressing the importance of the organisation providing diversionary community activities to support young people living away from their families.

Profile of the Service in the Community

- 3.16 Supported accommodation schemes can be unpopular with neighbours and from time to time issues arise due to antisocial behaviour, noise, parties. These issues tend to occur during evenings and weekends. The current contract only covers the cost of 24 hour support in one of the schemes. However CCTV cameras have been installed in most of the schemes which enable staff to monitor activity and identify which tenants have been involved in problems. Community police are regularly called to the schemes.
- 3.17 The tenants are inclined to get involved in drug taking, petty theft, gangs, threatening behaviour and violence. Young women are prone to involvement in abusive relationships. The provider has reported 41 incidents during the last year. The majority of these take place during the evening or at weekend.

Demand for the Service

3.19 Demand for the service remains high. The service has not met utilisation targets over the last year because Landlords have failed to carry out maintenance at the schemes in a timely manner. There have also been times when the support needs profile of the young people referred has been higher than the provider or the Landlord could accept into schemes where the support provided is at a lower level. In this instance young people may be placed in bed and breakfast accommodation with floating support.

Suitability of Accommodation and Maintenance

- 3.21 Ownership of the accommodation is set out in Table 1. The landlords Look Ahead and A2 Dominion were support providers under the previous contract. When the support contract was awarded to One Support these organisations contracted One Support to take responsibility for day to day housing management and took a less active interest in the properties.
- 3.22 Over the period of the contract there has been a noticeable decline in the standard of maintenance of the accommodation. As part of the support service One Support assists young people to liaise with their landlord regarding repairs and other emergencies as required. However, responses are very slow, or inadequate. Council officers and One Housing Group Officers have spent significant amounts of time chasing landlords to make repairs and maintain the properties. Most issues are only resolved after a number of months. The reluctance of the landlords to complete maintenance and repair work to the schemes is becoming a major concern.
- 3.23 During the contract One Support have demonstrated commitment by spending £46k of their own funds on renovating and securing the Hub which included installation of a new CCTV system. They have also indicated their willingness to jointly invest with the landlord in CCTV for Stembridge and Croydon Road schemes where recent incidents have highlighted the need for CCTV to be installed in all the schemes to facilitate better management of incidents.
- 3.24 Officers have considered the suitability of the current accommodation as part of this review. The conclusions are set out below:

Name of Scheme Units Level	Notes
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1-3 Anerley Station Road Look Ahead	8	H	This property is a pub which was converted into supported accommodation around 2000. The building is listed. The layout of the building makes the scheme difficult to manage as staff cannot observe or control the entrance. There is only one tiny communal room which accommodates 2 people at a time. The individual accommodation is in poor repair and bathrooms are shared. This is not ideal for a high support scheme.
34 Thicket Road, Anerley Look Ahead	7	Μ	This property was converted in 2005 and was specifically designed for this purpose. It has a staff office at the front of the building, a communal area and an informal training kitchen. All the units have self- contained facilities
The Hub St Mary Cray Look Ahead	6	L	Converted from a pub in 2004. These units are above a youth centre. There are no offices or communal facilities within the scheme.
98 Wiverton Road Sydenham L&Q	4	L	Converted from a house before 2000. There are no communal facilities or offices.
43 Stembridge Road Casa Support	4	L	Converted from a house prior to 2000. No office or communal facilities. These units are self- contained and are used as move on from schemes where there is more support.
142 Croydon Road Anerley Casa Support	5	М	Converted from a house prior to 2000. There is a small office on site. These units are self- contained and are used as move on from schemes where there is more support.
4 Hawes Road (Teenage Parents) Bromley Casa Support	6	М	Converted from a house in 2005. This was purposely designed to accommodate mothers and babies. It has both office and communal accommodation which is well used.
11 Highland Road Bromley A2 Dominion	5	М	Converted from a house in the 1990s this scheme has no office or communal facilities. It has self -contained accommodation for an appropriate adult who provides some very limited support to tenants of the scheme.
Drake Court Orpington A2 Dominion	14	М	Purpose built scheme in 1980s. Units are not self - contained but there is a self -contained flat which can be used for an appropriate adult.
TOTAL UNITS	59		

- 3.25 Officers recognised that the accommodation being used was not suitable in that it made schemes management difficult. In the purpose built schemes it is easier for the staff to control access by non-residents or to record it on CCTV.
- 3.26 One Support have indicated that they would be prepared to make longer term investments in accommodation in Bromley, either by purchasing and refurbishing some of the existing

schemes, or by building a bespoke scheme which has been designed specifically to deliver supported housing. In order to pursue one or both of these options One Support would require a longer term contract with the Council.

3.27 The property landlords are unwilling to share longer term plans for the properties prior to being informed of the Council's commissioning intentions for the support service.

Market Situation

- 3.28 The market for supported housing has changed during the last few years. All local authorities have undertaken procurement exercises and have radically reduced the service costs. Whereas ten years ago the providers ranged from small local voluntary sector organisations to national charities the profile has changed so that most contracts are now won by a handful of large independent sector organisations. These organisations may still be registered social landlords, but many have closed down their support functions.
- 3.29 The Council made good use of the Southwark and Lewisham Supporting People Framework in order to minimise procurement work and achieve competitive contract prices. This framework expired on 31.3.14, but a new framework is currently being procured with Bromley as a named partner. The new framework should be available for use from April 2015.
- 3.30 The hourly support rate has dropped from £25 per hour to £15 per hour. The Council achieved significant savings through re-tendering in 2011 and would not achieve a similar reduction unless the service specification was seriously reduced.

Options

3.31 There are a range of inter-dependencies that have been considered whilst determining the future options for this service, all in the context of an uncertainty about future available budget. The options considered are listed below:

Service Options

- a) To cease funding both services entirely. This would have a negative impact on the housing department and Children's Social Care budgets as the Council would still have statutory duties under housing and care legislation. The estimated cost of providing an alternative service would be £1.5m per annum.
- b) To continue to support the accommodation based units but to cease funding the floating support service entirely. This would impact on young people's ability to adjust to independent living and sustain tenancies. The estimated cost to the Council would be £125k assuming that 10% of recipients would lost their tenancies.
- c) To continue with floating support, but to cease funding the support service into accommodation based services. The impact of this would fall on the housing department as the landlords of the accommodation would be unlikely to continue to allow the properties to be used by young people with no element of support or supervision. The estimated costs of alternative arrangements would be £1.3m per year.
- d) To reduce the current service specification and the number of supported accommodation schemes in order to concentrate funding on those where accommodation is more fit for purpose and easier to manage. Reducing the number of units would still impact on other departments as above.

e) To retain the floating support service (43 units) and accommodation based tenancy sustainment service (59 units) and to add the provision of spot placements for young people who have higher needs to the requirement. Officers will be seeking efficiencies within the service.

Procurement Options

- a) to undertake a procurement exercise using the current service profiles to test the market to see if further savings are achievable. It would be cost effective to use the Supporting People framework when available, although this may require a short extension to the existing contract.
- b) to undertake a procurement exercise using the current service specification, but requiring the provider to bring their own or develop new build accommodation appropriate for the contract. This option would require a short extension to the existing contract.
- c) as above, but expand to undertake a more complex procurement exercise which expands the current specification to include the provision of semi-independent accommodation and support as required. This may deliver some savings for Children's Services.
- d) to build on relationship with existing provider and negotiate a new 3 year contract with One Support within existing resources using existing accommodation and assuming that landlords will continue to make the properties available.
- e) to build on existing provider relationship and negotiate a new contract for a longer period with One Support on the basis that they will purchase and remodel some existing schemes and / or develop a purpose built facility to replace current stock. If this option is pursued Officers would be using a "negotiated" procedure.

Conclusions

- 3.32 Officers recommend
 - that the Council retain the floating support service (43 units) and accommodation based tenancy sustainment service (59 units) and to add the provision of spot placements for young people who have higher needs to the requirement. Officers will be seeking efficiencies within the service, (service option e)
 - that Officers undertake a procurement exercise which to include the provision of semiindependent accommodation and support as required. This may deliver some savings for Children's services (procurement option c)

These options will provide the best solution for the Council, as this will allow the market to be tested for all 3 services. The solution will also formally transfer the entire responsibility for the provision of accommodation to the provider(s).

4 POLICY IMPLICATIONS

4.1 National and local policies expect that appropriate accommodation and support is provided for homeless young people and care leavers. These services are key to fulfilling the statutory duties of Care Services towards young homeless people as well as Children's Service responsibilities for under 18 care leavers and younger teenage parents.

5 FINANCIAL IMPLICATIONS

- 5.1 The 2014/15 budget for contracted Supporting People services is £1,751,340. Within the budget the allocation for these young people's contracts is £438,870. The budgets for Placements of Care Leavers and Unaccompanied Asylum Seeking Children are £690,890 and £320,730, totalling £1,011,620. The estimated total expenditure for 2014/15 is £1,307,000.
- 5.2 This report recommends that a procurement exercise is undertaken to let a new contract for these services. The report acknowledges that the current contract price benchmarks favourably against comparable services and that it is most unlikely that further significant savings will be achieved via market testing. It is possible that some savings in the price of semi-independent places may be achieved through a tender process.
- 5.3 The new contract will include the flexibility to enable the Council to request further efficiencies/savings or to terminate should the need arise during the extension period.

6 LEGAL IMPLICATIONS

- 6.1 Contract Procedure rules require officers to undertake a tendering exercise in order to establish best value for money when awarding this contract.
- 6.2 The properties at which the services and accommodation are provided are not owned by the Council. The new contract will require providers to identify and make arrangements for making accommodation units available.
- 6.3 Officers obtained authority to enter into the new framework agreement being set up by Southwark and Lewisham Councils in 2012.
- 6.4 Changes to UK procurement regulations will be announced during 2015 in response to the changes to EU Regulations. The procurement process may be affected by these changes, depending on the time scale for the implementation of the new regulations and timing on the issues of EU Notices (if required).

Non-Applicable Sections:	Personnel implications
Background Documents: (Access via Contact Officer)	ACS 10043 Commissioning Arrangements for Supporting People Services for Young People.
,	ACS 10059 Commissioning Arrangements for Supporting People Services for Young People.
	ACS 11023 Award of contract for Supporting People

Services
ACS12031 Supporting People Services Joint Framework Agreement
Gateway review of One Support Services – January 2014
CS14042 Contract Award Tenancy Support Services for Young People – June 2014

Agenda Item 8c

Agenda Item No.

London Borough of Bromley		
PART 1 - PUBLIC		

Decision Maker: EXECUTIVE Pre Decision Scrutiny by CARE SERVICES PDS COMMITTEE 21st Jan 2015 11th February 2015 Date: Non-Key **Decision Type:** Non-Urgent Executive Title: DEPRIVATION OF LIBERTY SAFEGUARDS UPDATE **Contact Officer:** Claire Lynn, Strategic Commissioner Mental Health and Substance Misuse, Commissioniong Division, Tel: 020 8313 4034 E-mail: claire.lynn@bromley.gov.uk Terry Parkin, Executive Director, Education and Care Services **Chief Officer:** Ward: Boroughwide

1. Reason for report

This report outlines the recent Supreme Court judgement relating to Deprivation of Liberty Safeguards and to deprivation of liberty of individuals. The report considers the implications of the judgement and updates the actions to address these.

The report also outlines the financial implications of this judgement following the mapping of numbers that has been undertaken and requests that the Executive agree further funding from contingency as highlighted in the report to Executive in June.

The report also asks members to note the proposal to establish a framework arrangement to provide the assessments that are required to be undertaken by psychiatrists.

2. RECOMMENDATION(S)

- 2.1 Members of Care Services PDS are asked to note and comment on the contents of the report
- 2.2 The Executive is asked to
- agree the additional funding of £163,345 for 2014/15 and recommends theinclusion of £628,040 in the 2015/16 budget to meet the requirements of the Supreme Court Judgement. For 2015/16, due to the uncertainty of the potential costs, half of the funding should remain in contingency and be subject to a further report to Executive in the new financial year.
- note the intention to commission the services of doctors as required using a framework agreement, in order to fulfil the Council's duties under the Mental Capacity Act 2005.



Corporate Policy

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

Financial

- 1. Cost of proposal: Estimated cost £ 263,765 2014/15 £728,460 full year
- 2. Ongoing costs: Recurring cost. £728,460
- 3. Budget head/performance centre: Mental Capacity Act
- 4. Total current budget for this head: £100,420
- 5. Source of funding: Core funding

<u>Staff</u>

- 1. Number of staff (current and additional): 1wte temporaily, 1.5 wte established post
- 2. If from existing staff resources, number of staff hours:

<u>Legal</u>

- 1. Legal Requirement: Statutory requirement. Mental Capacity Act 2005
- 2. Call-in: Call-in is applicable

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): 900-1000 people

Ward Councillor Views

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

3. COMMENTARY

- 3.1 The Deprivation of Liberty Safeguards (DOLS), introduced as an amendment to the Mental Capacity Act in April 2009, aimed to prevent decision making which deprived people of their liberty unless properly authorised. The safeguards cover people, regardless of the funding source, in registered care/nursing homes and in hospitals, who have a mental disorder, and who lack the capacity to consent to the care provided, where that care may include the need to deprive people of their liberty. It does not apply to people detained under the Mental Health Act 1983.
- 3.2 Hospitals and care homes are the 'managing authorities', and under the Act are responsible for identifying when a deprivation of liberty is occurring within their own service provision and for making referrals to the designated 'supervisory body'. The supervisory body is the Local Authority for both health and social care provision.
- 3.3 The assessment process for a Deprivation of Liberty Safeguard is that the hospital or care/nursing home submit a request for an authorisation to the supervisory body, Bromley Council. This request, regardless of who is funding the placement, can either be:

Urgent, if there has been an unforeseen change in need, which requires an assessment within 7 calendar days;

Standard which requires an assessment within 21 calendar days.

On receiving the request a doctor, who is qualified under section 12 of the Mental Health Act 2007, and a Best Interest Assessor are identified (usually a qualified social worker who has received accredited training) to complete the following assessments:

- Establishing the individual is over 18 years;
- Individual lacks capacity to consent to being in the care home or hospital in order to receive the care or treatment that is necessary to prevent harm to them;
- Individual has a mental disorder;
- Whether this is the least restrictive placement and whether it is in the individual's best interest to be deprived of their liberty;
- That the individual is not liable for detention or treatment under the Mental Health Act;
- Whether there is an advance decision or any other legal notice in place

The Best Interest Assessor must also identify someone to represent the person for the length of time the DOLS is in place; this is usually a member of their family. On completion of these assessments and the paperwork the Executive Director for Education, Care and Health Services authorises the DOLS. This has to be reviewed a minimum of annually although in some cases it will be more regularly than that, which requires the above process to be repeated. This process is outlined in the legislation and in the statutory code of practice on deprivation of liberty.

3.4 Nationally there was a year-on-year increase in the number of applications completed for Deprivation of Liberty Safeguards since their introduction in 2009/10. This was not reflected in the Bromley figures which remained reasonably static (although the numbers are small).

Year	Number of applications nationally	% increase in applications nationally	Number of applications in Bromley
2009/10.	7,157	n/a	4
2010/11	8,982	26	14
2011/12	11,382	66	6
2012/13	11,887	4	5
2013/14	n/a	n/a	15

- 3.5 On 19 March 2014, the Supreme Court handed down its judgments in the case of "P v Cheshire West and Chester Council and another" and "P and Q v Surrey County Council". The full judgments can be found on the Supreme Court's website at the following link: http://supremecourt.uk/decided-cases/docs/UKSC 2012 0068 Judgment.pdf
- 3.6 The Supreme Court held that the individuals, all young people with learning difficulties, had been deprived of their liberty as they were under continuous supervision and control and were unable to leave their placements. This was the case even though the individuals enjoyed lives outside their placements and seemed to be content with their situations. The Court held that the individuals were entitled to the protection afforded to them by the Mental Capacity Act 2005, which requires, among other things, a periodic review to ensure the deprivation of liberty remains in the individual's best interests.
- 3.7 The Supreme Court confirmed that to determine whether a person is deprived of their liberty there are two key questions to ask, which they describe as the 'acid test':
 - Is the person subject to continuous supervision and control? (all three aspects are necessary)

AND

• Is the person free to leave? (The person may not be saying this or acting on it but the issue is about how staff would react if the person did try to leave).

This now means that if a person is subject both to continuous supervision and control and not free to leave they are deprived of their liberty. Unfortunately the Court did not define these elements.

- 3.8 The judgment is significant in determining whether arrangements made for the care and/or treatment of an individual lacking capacity to consent to those arrangements amount to a deprivation of liberty. The Court emphasised that even though an individual may never have tried to leave, the fact that there are measures in place to prevent them from leaving amount to a deprivation. A deprivation of liberty for such a person must be authorised in accordance with one of the following legal regimes: a deprivation of liberty authorisation or Court of Protection order under the Deprivation of Liberty Safeguards in the Mental Capacity Act 2005, or (if applicable) under the Mental Health Act 1983.
- 3.9 The other consequence of the Supreme Court judgements is that a deprivation of liberty can take place because of a care regime in supported living, day care or the individual's own home and although currently the Mental Capacity Act does not cover a Deprivation of Liberty Safeguard process being followed these situations should be referred to the Court of Protection. The judgement also lowered the age of consideration for a deprivation of liberty to 16 years. This is in terms of an individual's capacity and takes no account of whether there is parental consent for any care regime

4 UPDATE ON THE ACTIONS FOLLOWING THE SUPREME COURT JUDGEMENT

- 4.1 Following the Supreme Court judgement a report was agreed at Executive to drawdown monies from the Local Reform and Community Voices grant in order to meet the initial work that needed to be undertaken to map the implications of these judgements. This has included ensuring that staff are fully briefed, that all applications are responded to within the timeframes and that work was undertaken to identify the numbers of people who may be subject to deprivation of liberty.
- 4.2 Since the April 2014 Bromley has received 247 requests (up to19/12/14) for people in care/nursing homes and hospitals. Information is being collected by the Department of Health to closely monitor the demand placed on Councils with this change in legislation which is reported in appendix two (Quarter 1 only). The total number of applications from 130 submitting councils in quarter 1 2014-15 was 21,600. In 2013-14 the total number of applications for these 130 councils was 12,400. There has been a further increase for quarter 2 but this detailed information has not yet been published. There are differences in the number of referrals across boroughs, in the main because of the size of the teams carrying out the work and how proactive they are able to be. For example Bexley has a team of nine Best Interest Assessors who are visiting all care/nursing homes and identifying the people subject to a deprivation rather than waiting for the homes to apply. On an on-going basis they have identified that they will need slightly less staff.
- 4.3 Mapping the probable numbers of people in Bromley that Deprivation of Liberty Safeguards (DOLS) would apply to has been difficult as identifying individuals has had to rely on detailed reading of assessments and making assumptions. It has been assumed that 50% of all people in residential/nursing homes should be subject to DOLS and the current referral rate of people in hospital who are subject to DOLS. This equates to 600 people. This level of referrals has not yet been received but can be expected from providers particularly as CQC will be making consideration of deprivation part of their inspection regime. If a referral is received we are unless there are exceptional circumstances which we must justify legally obliged to carry out an assessment within the prescribed timeframes. Damages can be awarded if these obligations are breached and not applying resources to deal witll not be accepted as exceptional circumstances.
- 4.4 For people who lack capacity and who fall outside the primary legislation, i.e. are under other care regimes apart from residential/nursing homes and hospitals, it is assumed there would be approximately 300 individuals to whom this would apply. This is a best case estimate as it assumes 100 young people under 18 who this may affect. Worst case assumes 200 taking the total to 400 people. The numbers depend on advice awaited on the position of residential schools. The Court of Protection has issued the process for cases falling outside of the primary legislation which for uncontested cases would be a paper process to a judge. This would cost £400 per case in Court fees plus assessments by a best interest assessor and Doctor, the latter costing about £300 per assessment and report. For the contested cases there would be an oral hearing costs of which could be between £5,000-£10,000 per case.
- 4.5 The current volume of work has been delivered by a small team of a senior practitioner, two best interest assessors seconded from Care Services with the use of additional assessors based in care services, a co-ordinator (seconded from Strategy and Performance) and other staff time in processing the authorisations. Independent assessors have been used for people placed outside of London and the home counties. Whilst there has been no breach of timeframes this has been difficult to maintain with a small number of staff. The staffing is on a secondment arrangement with locum staff being used to backfill their substantive posts. In all it has taken an average of 16 hours staff time (excluding the doctor and including administration) per assessment which would require at the current level of referrals between 4-5 staff to meet the demand, allowing for leave etc.

- 4.6 It has become evident that the work required to meet these legal requirements of the expected numbers is considerable and would equate to nine staff in total. (Using an average of 16 hours per assessment across 900 assessments). However as it is appropriate for some assessments to use independent assessors and best interest assessors in care services it is recommended that a central team is established with five care managers who are Best Interest Assessors, a senior care manager who will manage the processes required, and a full time administrative coordinator. These arrangement would be in line with other authorities staffing. Consideration has been given to other models of provision for example seconding best interest assessors from care services in the longer term and paying for back fill of their posts, however the costs would be equivalent and the risk is that care services would lose their more experienced staff thus destabilizing the service particularly in the safeguarding aspect of work. Reduction of the proposed staffing required, for example to meet the immediate demands only, would mean that if there was a demand over the current 4/5 assessments per week, assessments could not be completed nor could doctors be engaged to complete assessments. Therefore the authority would breach its statutory responsibility with the risks of Court awarding damages against the Council to individuals or organisations where liberty had been deprived.
- 4.7 A letter has been sent to all care providers to raise awareness of the Supreme Court judgment, as we are obliged to do by the Department of Health, and how to make a referral. Training is being updated both for providers and staff to ensure the awareness of the need to reduce restraint and restrictions and promote liberty in care plans.
- 4.8 The implications arising from this judgement both in terms of practice and also the number of Deprivation of Liberty Safeguards which will need to be considered have been detailed in this report but there may be further cases brought to Court to test circumstances and definitions which could change some of the detail of the provision, at the moment the interpretation of judgement will be left to local areas.

5 FINANCIAL IMPLICATIONS

5.1 The activity for Deprivation of Liberty Safeguards is funded through the Mental Capacity Act budget which is £97,180 for 2014/15. This budget is core funding. There is also £24,057 part of the Local Reform and Community Voices grant- 2014/15 which was drawn down following the agreement of the Executive in June 2014. The proposed actions and costs required to meet this statutory requirement detailed to Executive was the costing for the initial implementation which is laid out in the table below alongside the current budget spend.

Budget heading	Current budget	Implementation costs (one off)
Officers pay	£46,080	£3,857
Temporary staff	£15,700	£10,000
Training	£4,100	£7,700
IMCA Service	£25,620	NIL
Advocacy (RPR)	£5,120	£2,500
Supplies	£3,800	NIL
TOTAL	£100,420	£24,057

5.3 The table below shows costs additional to the existing budget including the additional costs for 2014/15 and the proposed spend for next year. The 2014 /15 costs reflect the transition process to a position in 2015/16 ensuring that all statutory responsibilities are met if the required staffing is in place.

TASK	2014/15 Part year costs	FULL YEAR COST	COMMENT
DOLS doctors	40,000	120,000	Assuming 50% (600) of people in residential/nursing lacking capacity and the level of hospital referrals remains static at an average of five per
			⁶ Page 154

assessments			year and that the average fee remains at £200 Including travel. There
000000000000000000000000000000000000000			may be additional pressures if there is an increase in hospital referrals
			or a increase in the fees paid for assessments. In order to manage this
			a approved framework to call off the use of doctors is recommended.
Deprivation			Assumes 50% of people (200) in supported living including extra care
doctors	15,000	90,000	lack capacity plus100 under 18 who this may affect. Worst case (200).
assessments for	13,000	30,000	assumes the court will require a S12 doctor to do this at a fee of £300
court			per assessment.
count			The Court process has been outlined with paper consideration for all
Legal costs	20,000	141,000	cases at £400 except where particularly complicated or is contested and
Logaroooto	20,000	141,000	therefore demands a hearing. Assuming 300 cases and the number
			contested (which is a total unknown) at 1%
			Based on the assumption that we would require these services for 1 in
Use of IMCA/RPR	5,000	20,000	25 people subject to DOLS in the best case based on current usage
	-,	,	based on 1000 people being assessed. Cost reflects the £5,000 in the
			existing budget for some of this activity.
			If all assessment / review staff were BIA's and this was part of the care
Training	nil	20,000	management process then the cost is £1,500 per person with a
0			refresher required annually assuming . Best case assumes an
			established team of BIAS and on-going training. Additional training is
			required around MCA which would take it to £20,000
			To establish a central team consisting of the following:
Staffing	83,345	237,040	Senior Care manager (BR13) plus on costs £44,040 Five care
			managers (BR11) plus on costs £193,000
			Co-ordinator (BR9) plus on costs 37,690 is currently costed against the
			existing budget
Total additional	163,345	628,040	
funding			
TOTAL BUDGET	263,765	728,460	

- 5.4 The doctors who are currently used to provide the required assessments are identified from a list of available doctors, work is offered dependent on location (to reduce travel payments) and cost. There are five doctors we use locally regularly and one we use occasionally (at his request). There are two who cover Kent, one in Essex and one in Sussex-these are used less often. On average doctors locally charge £180 per assessment and travel at 45p per mile, these costs can vary where doctors from other authorities have to be used. It is proposed, in order to meet financial regulations, as usage has increased, to procure these services from a framework of approved providers.
- 5.5 The additional funding required for 2015/16 could be as high as £628k. However there are some elements of uncertainty that remain in terms of the potential funding requirement. It is therefore recommended that 50% of the £628k (£314k) be agreed to be draw down for 2015/16. The remaining half would remain in contingency and be subject to a further report to Executive in the new financial year once the costs have been clarified further

6 LEGAL IMPLICATIONS

- 6.1 The statutory regime for the implementation and administration of what is deemed to constitute the deprivation of liberty of an individual is prescribed within sections 4-6 of the Mental Capacity Act 2005 and statutory guidance. These must be read in conjunction with any Judicial authority to interpret the requirements placed upon a local authority or hospital by the recent decision of the Supreme Court in P-v-Cheshire and others. The Supreme Court in the judgments mentioned above has identified a range of people who are subject to DOLS
- 6.2 We are obliged to put in place and ensure that its DoLS regime is compliant with all legal requirements and have due regard to relevant guidance and case law. Failure by the Council to adopt a lawful, correct and proportionate approach to the application of DOLS in seeking the court to authorise detention would be unlawful. If a deprivation is not authorised there is a material risk that the Local authority could be subject to an application for judicial review a

claim for breach Article 8 of the Human Rights Act (Right to Respect for Private and a Family Life), and a claim for compensation.

- 6.4 There are activy advocacy groups in this area and as affected indivuduals are likely to have access to public funds the litigation risk of non-compliance is significant.
- 6.5 If there is non-complaince there is also a lower but still material litigation risk from care prioviders if they suffer loss as a consequence,

7 PERSONNEL IMPLICATIONS

7.1 In order to obtain the widest field of candidates with the appropriate skills and experience it would be necessary to seek authority to advertise positions both internally and externally in line with the Council's recruitment procedures.

Non- Applicable Sections:	Policy Implications
Background	http://cds.bromley.gov.uk/documents/g4918/Public%20reports%20pack%20
Documents:	Tuesday%2010-Jun-2014%2019.00%20Executive.pdf?T=10
(Access via	
Contact	
Officer)	

APPENDIX ONE

TASK		DATE TO BE COMPLETED	COMMENT
IMMEDIATE RESPONSE	MEDIATE RESPONSE		
	Agreement that existing BIA 's (and their line management) must see any assessment as a priority	On going	Currently there are 16 BIA's. Two BIA's are based centrally to carry out the majority of the work but other BIA's are being used.
Respond to immediate increase in number of DOLS requests	If required pay overtime if capacity of existing staff is problematical	On going	This facility has not been required. Independent BIA's have been employed on a one off basis for individuals in placements where travel for local staff would be excessive. To date just under £4,000 has been spent on this.
	Issue letter to all settings and all partner organisations outlining the judgement.	Completed	Letter was sent to all providers both in borough and out of borough
	Provide guidance for BIAs in light of new judgement	On going	Regular meetings held with all BIA'S to continue to discuss the implications of the judgement and improving practice.
REVIEW OF CASES			
Review any DOLS decisions not granted (or expired) since 2009	Prioritise within that those most like P and Q i.e. learning disability with 1:1 support or similar	Completed	In Bromley this is twelve cases for some DOLs were authorised in light of the new criteria
	Map projected numbers of DoLS Cases	Completed	It is assumed that 50% of all cases and new referrals should be subject to DOLS. Assuming 50% (600) of people in residential/nursing lacking capacity and the level of hospital referrals. Best case estimate only of the number of young people (100) under 18 who this may affect. Worst case (200). Awaiting legal advice on the position of residential schools.
Review all cases where the individual lacks capacity and direct services are being provided	Map projected numbers of Court of Protection (Court of Protection) cases	Completed	It is assumed based on this that there would be approximately 300 individuals this would apply to.
	Prioritise cases identified		This proactive work has not yet commenced due to the volume of referrals from providers
	Establish a plan to screen through these and make applications to Court of Protection where applicable.	Completed	The Court of Protection has issued some detail of the process it will follow and it is recommended that locally the same process as a DOLS will be followed locally with the BIA preparing a report for Court in addition to the Doctors recommendation-this would be

			co-ordinated by the DOLS team.
	Map likely on-going costs to take cases to Court	Completed	The Court has detailed costs as part of the process which will be £400 for paper authorisation if it is a complex or contested case then it would be subject to an oral hearing when costs could be an average of £7,000 per case, obviously the number of these is difficult to forecast but would be a minority.
	Develop process for this Court work and how it is undertaken	Completed	It is recommended that this work is undertaken by a centrally established Deprivation of Liberty Team eventually as part of Safeguarding service using BIAs to prepare the requisite papers for the Court.
	Map and cost the impact on the use of the IMCA and RPR	Completed	An up to date costing is currently being mapped but is part of the review of advocacy services and is also dependent on awaited guidance on independent advocacy as part of the Care Act
INFORMATION/TRAINING REQUIREMENTS			
Inform all key stakeholders of the Supreme Court judgement and of the agreed actions	Key meetings to be identified	On-going	Key meetings have been identified with regular reports to BSAP Executive, PDS, Executive, ECHS MT and the CCG.
	This will include attendance at Care Homes Forum, meeting with DoLS Lead CCG & Hospital Trust Discuss with Oxleas and agree actions for mental health	On-going	This is on going
Develop tools/guidance to establish practice when providing a direct care regime, ensuring awareness of the need to reduce restraint and restrictions and promote liberty in care plans	Develop pack to be given to all individuals assessed for direct services on establishing LPA'S, Advance decisions to ensure that individuals can prepare if they may lose capacity	End of January	The CCG has secure funding for this piece of work, it is currently underway as a joint piece of work with a pack/leaflet being produced both on websites and hard copy for all health and social care providers (including GP's) to use when individuals come into contact with services. Alongside this the funding is also going to be used to produce an information leaflet for providers to issue to families when they are about to make a referral for a DOLS authorisation.
	Ensure that capacity assessments are being completed appropriately and separately on Carefirst by changing the overview assessment form to ensure that the information is captured on the capacity form only	End of June	Carefirst are working on ensuring that if the overview assessment form requires the capacity assessment is completed. The majority of teams have been visited and informed on DOLS changes, least restrictive practice and the legal requirement for capacity assessments. Further training is required and is currently being commissioned by L&D.
Offer training updates/ briefings in as many settings as possible making clear the need for	Training identified for senior managers, refreshers for staff and the need for "roadshows" Develop a training plan for	On going	Session for managers is planned for end of November, with further roadshows planned as required. Meeting to be held with the hospital to look at training of hospital staff

less restrictive options before resorting to DoLS	hospital staff		
	Visit all care management/social work and medical teams to discuss the implications of least restrictive practice	On going	The majority of teams (including children's and education management teams have been visited, this is an on- going process
	Update training materials	Completed	Meeting has been held with Training and development to scope this. Training programme is being commissioned as is a robust process to select individuals for BIA training
	Provide regular briefings as an e mail update using In Touch	On going	This has yet to be done
	Update policies and procedures in line with the acid test		These procedures are being drafted for consideration .
	Ensure that all staff are aware of the Mental Capacity Act and how to carry out assessments.	On going	Whilst the majority of staff have received training the application of the Act is variable –see comments above
Increase the number of BIA's	Staff have been identified to do the BIA training and refresher training for existing BIA's is also being procured	d refresher g BIA's is On going developed to ensure that sta	
STAFFING			
Ensure the immediate review work is resourced	Recruit temporary staff (1WTE) to carry out review work	Completed	Two BIA's have been seconded from Care services and an individual to coordinate the administration of this has been seconded from Strategy and Performance. It has been impossible to find agency BIA s on a locum basis but this continues to be pursued.
	Discussions with Legal Services as to the possible impact on their staffing as a result of the review	Completed	Legal services are unable to assess the impact until Court cases are pursued. Their view is that if experience BIA's are part of a central team then routine court papers will be of the required quality reducing the legal services workload

APPENDIX TWO

Quarter one applications for DOLS by comparator or neighbouring boroughs (who provided data to Department of Health)

LA Name	Number of Applications Q1	Number of Applications (2013/14)
Greenwich	47	27
Wandsworth	74	37
Barnet	58	48
Bexley	244	74
Bromley	39	12
Croydon	52	46
Enfield	51	66
Harrow	33	14
Havering	53	27
Hounslow	45	16
Kingston upon Thames	98	28
Merton	46	29
Redbridge	47	29
Richmond upon Thames	103	31
Sutton	50	31

Agenda Item 9

Report No. CS14115

London Borough of Bromley

PART 1 - PUBLIC

Decision Maker:	CARE SERVICES POLICY DEVELOPMENT AND SCRUTINY COMMITTEE				
Date:	21 st January 2015				
Decision Type:	Non-Urgent	Non-Executive	Non-Key		
Title:	DRAFT 2015/16 BUDGET				
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:	Terry Parkin, Executive Director of Education, Care and Health Services				
Ward:	Boroughwide				

1. Reason for report

- 1.1 The prime purpose of this report is to consider the Portfolio Holder's Draft 2015/16 Budget which incorporates future cost pressures and initial draft budget saving options which are being reported to Executive on 14 January 2015. Members are requested to consider the initial draft budget savings proposed and also identify any further action that might be taken to reduce cost pressures facing the Council over the next four years.
- 1.2 Executive are requesting that each PDS Committee consider the proposed initial draft budget savings and cost pressures for their Portfolio and the views of each PDS Committee be reported back to the next meeting of the Executive, prior to the Executive making recommendations to Council on 2015/16 Council Tax levels.
- 1.3 There are still outstanding issues and areas of uncertainty remaining. Any further updates will be included in the 2015/16 Council Tax report to the next meeting of the Executive.

2. RECOMMENDATION(S)

The Care Services PDS Committee are requested to:

- (a) Consider the update on the financial forecast for 2016/17 to 2018/19;
- (b) Consider the initial draft saving options proposed by the Executive for 2015/16.
- (c) Consider the initial draft 2015/16 Budget as a basis for setting the 2015/16 Budget;
- (d) Provide comments on the initial draft 2015/16 Budget for the February meeting of the Executive.

Corporate Policy

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

<u>Financial</u>

- 1. Cost of proposal: N/A
- 2. Ongoing costs: Recurring cost.
- 3. Budget head/performance centre: Care Services Portfolio Budgets
- 4. Total current budget for this head: £116,209k
- 5. Source of funding: Draft revenue budget for 2015/16

<u>Staff</u>

- 1. Number of staff (current and additional): full details will be available with the Council's 2015/16 Financial Control Budget published in March 2015
- 2. If from existing staff resources, number of staff hours: N/A

Legal

1. Legal Requirement: Statutory requirement.

The statutory duties relating to financial reporting are covered within the Local Government Act 1972; the Local Government Finance Act 1998; the Accounts and Audit Regulations 1996; the Local Government Act 2000; and the Local Government Act 2002.

2. Call-in: Call-in is not applicable.

Customer Impact

- 1. Estimated number of users/beneficiaries (current and projected):
- 2. The 2015/16 budget reflects the financial impact of the Council's strategies, service plans etc which impact on all of the Council's customers (including council tax payers) and users of the services.

Ward Councillor Views

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

3. Approach to Budgeting, Financial Context and Economic Situation which can impact on public finances

- 3.1 Forward financial planning and financial management is a key strength at Bromley and this has been recognised previously by our external auditors. This report continues to forecast the financial prospects for the next 4 years but some caution is required in considering any projections beyond the 4 year Comprehensive Spending Review period i.e. 2016/17 to 2018/19.
- 3.2 Economic growth has returned and the UK is now seeing a faster increase in economic activity than the rest of the Eurozone. National debt is expected to fall but tax revenues remain weak. The pace of spending reductions will be faster than previously expected to reflect the latest position indicated by the Autumn Statement with no real increase in public spending expected until at least 2020. With the ongoing protection of health, overseas aid and possibly education, the significant austerity programme for local government will continue beyond the current financial forecast period i.e. beyond 2018/19. The Budget Strategy has to be set within the context of a reducing resource base, with Government funding reductions continuing until beyond 2020 - the on-going need to reduce the size and shape of the organisation to secure priority outcomes within the resources available. There is also a need to build in flexibility in identifying options to bridge the budget gap as the gap could increase further. The overall updated strategy has to be set in the context of the national state of public finances, unprecedented in recent times, and the high expectation from Government that services should be reformed and redesigned. There is also an on-going need to consider "front loading" savings to ensure difficult decisions are taken early in the budgetary cycle, provide some investment in specific priorities and to support invest to save opportunities which provide a more sustainable financial position in the longer term, ensuring stewardship of the Council's resources. Any budget decisions will need to consider the finalisation of the 2015/16 Budget but also consider the longer time frame where it is now clear that the continuation of the period of austerity up to 2020 and beyond is inevitable. Members will need to consider decisions now that can have a significant impact on the future years' financial position which ultimately will help to protect key services.
- 3.3 The Council receives a low level of government funding and has maintained the lowest Council Tax level in outer London (Band D equivalent, using ONS categories) by having the lowest spend per head of population in London. One of the key issues in future year budgets will be the balance between spending, Council Tax levels, charges and service reductions in an organisation starting from a low spending base. It is important to recognise that a lower cost base reduces the scope to identify efficiency savings compared with a higher cost organisation. Any decisions will need to take into account the longer term impact on the Council's financial position financial sustainability will be key in order to protect key services to Bromley residents.

4. Changes that could impact on longer term financial projections

- 4.1 In considering the next four years there remains many variables which will impact on any final outcome. Some examples are highlighted below:
 - (a) The ongoing scale of schools transferring to Academies will result in further significant reductions in the Government's LACSEG funding (now known as Education Services Grant) although the pace of transfer has been less than previously estimated. The ongoing transfer is expected to lead to an ultimate loss of £6m per annum between 2013/14 and 2016/17;

- (b) Previous market assumptions about interest rates increasing have not materialised which is impacting on Income from interest on balances. Low lending rates are expected to continue over the next year due to, for example, the continuation of "funding for lending", Bank of England is expected to keep the base rate low, and limiting the lending period to banks to reflect cautionary advice from credit rating agencies. The Treasury Management policy was reviewed and Members agreed alternative lending options including investment in a property fund, diversified growth fund and increasing of lending limits to part nationalised banks which has led to potential additional income of £1.15m per annum. There remains a need to ensure the strategy finds the right balance between Security, Liquidity and Yield – in that order. In a recent survey Bromley achieved the second highest returns against a benchmark group of 12 local authorities. An assumed return of 1% has been included in the financial forecast for bank lending. Some local authorities are achieving returns as low as 0.25% per annum. Alternative investments relating to acquisition of properties as part of a wider investment strategy is expected to deliver additional income of £1m in 2015/16 rising to £2m per annum from 2016/17 (in addition to income of £2m per annum achieved through other property acquisitions);
- (C) The outcome of the review of local government finance, implemented from 2013/14, has led to the localisation of business rates and a new council tax support scheme. These changes resulted in a significant risk transfer from central government to local government. The Council Tax Support scheme implemented from April 2013 had transitional arrangements with client liability of 8.5% which increases to 19% from 2014/15. The draft 2015/16 Budget reflects continuation of the 19% agreed by Full Council on 8th December 2014. The latest estimate from the Council's business rate share is included in the draft 2015/16 Budget and will ultimately be partly dependent on the outcome of appeals on valuations, level of conversion of office accommodation to residential dwellings as well as general trends in business rate income. The Government previously managed the increasing costs of council tax benefit and the risks relating to variations in business rates. The changes on localisation of business rates could provide potential financial benefits in the medium to longer term when the key developments in Bromley are completed e.g. Bromley South development, Crystal Palace etc.:
- (d) Government grants are a key source of income and continue to reduce in future years to reflect planned reductions in public spending;
- (e) The coalition Government have introduced many changes in its first term including, for example, changes to health (including transfer of funding for public health from 2013/14 with the transfer of 0-5 year old services from 2015/16), welfare benefits, Care Act, first stage of integration of health and social care (using Better Care Fund) and localism (including new powers of competence for Councils to act in the interest of their communities);
- (f) There will be many other variables as the forecast is based on predicting the next four years; the longer the timescale the greater the uncertainty. It is clear that a significant "budget gap" will continue beyond the four year financial forecast period.

5. Latest Financial Forecast

5.1 The report to executive in January 2015 identified a budget gap rising to over £53m per annum by 2018/19 which is broken down in the table below. The budget gap from 2016/17 rises steeply as the expected loss in Government funding is expected to increase sharply during that period.

Variations Compared with 2014/15 Budget				
	2015/16	2016/17	2017/18	2018/19
	£m	£m	£m	£m
Cost Pressures				
Inflation	4.1	8.6	13.2	17.9
Grant Loss	11.0	22.1	37.1	44.1
Real Changes (see Appendix 5,	11.0	22.1	07.1	
Executive report)	6.4	11.9	14.6	17.8
	011			
Total Additional Costs	21.5	42.6	64.9	79.8
Income/ savings				
Saving proposals (detailed in Appendix				
6, Executive report)	-8.8	-11.7	-11.7	-11.7
Funding from Better Care Fund towards				
protection of social care	-3.3	-3.3	-3.3	-3.3
Impact of revised Treasury Management				
Strategy	-1.1	-1.1	-1.1	-1.1
Increase in property numbers (council tax	-0.9	0.0	0.0	0.0
base)		-0.9	-0.9	-0.9
Total income/ savings	-14.1	-17.0	-17.0	-17.0
Other Proposed Changes			4 7	
New Homes Bonus	-4.4	-4.7	-4.7	-4.7
New Homes Bonus – contribution to		4 7	4 7	4 7
Investment Fund	4.4	4.7	4.7	4.7
Collection Fund Surplus (2012/13)	-3.0	0.0	0.0	0.0
set aside as one off support towards				
meeting funding shortfall in 2015/16	0.0	0.0	0.0	0.0
Collection Fund Surplus 2013/14	-2.3	0.0	0.0	0.0
Reduction in business rate share	0.5	0.5	0.5	0.5
	-4.8	0.5	0.5	0.5
	_	_	_	
Impact of 2.0% increase in Council tax	-2.5	-5.0	-7.6	-10.0
Remaining "Budget Gap"	0.1	21.1	40.8	53.3

Variationa Compared with 2011/15 Dudget

The above table shows, for illustrative purposes the impact of a council tax increase of 2% in 2015/16. Each 1% council tax increase generates on-going annual income of £1.26m.

5.2 The Council has to continue to plan for a very different future, i.e. several years of strong financial restraint. It is important to recognise that, given the current ongoing period of austerity, the downside risks significantly exceed the opportunities for improvement and that the budget gap in future years could widen substantially.

6. Care Services Portfolio Growth Pressures & Real Changes

6.1 No additional growth pressures have added to the initial budget for the Care Services Portfolio. However there has been additional allocation of funding set aside in contingency for the following:-

CONTINGENCY SUMS

DESCRIPTION

	<u>2015/16</u> <u>£'000</u>	<u>2016/17</u> <u>£'000</u>	<u>2017/18</u> <u>£'000</u>	<u>2018/19</u> <u>£'000</u>
Increase in cost of homelessness/impact of welfare reforms	1,100	2,100	3,100	4,300
Deprivation of Liberty	628	628	628	628
Net impact of Social care overspend	3,022	3,022	3,022	3,022
Net impact of Care Act	278	379	- 43	266
	5,028	6,129	6,707	8,216

6.2 Subject to the finalisation of the 2015/16 budget some of these sums may need to be requested to be drawn down and if this is the case will need to be approved by the Executive.

7. Care Services Portfolio Saving Options

7.1 A summary of the new savings options relating to the Care Services Portfolio is shown in the table below with more detail included in Appendix 1. Appendix 2 includes the draft estimate summary sheet, budget variations, notes on the budget variations and the subjective analysis.

	2015/16 £'000	2016/17 £'000	FULL YEAR £'000
Essential car user allowances	151	151	151
Childrens Social Care	419	419	419
Adult Social Care	1,265	1,265	1,265
Commissioning	415	415	415
Strategic & Business Support	124	124	124
Housing	51	51	51
	2,425	2,425	2,425

7.2 Further details of the savings will be circulated prior to the meeting following the Executive meeting on the 14th January 2015.

8. COMMENTS FROM THE EXECUTIVE DIRECTOR FOR EDUCATION, CARE AND HEALTH SERVICES

- 8.1 Expenditure pressures and service risks in relation to services in the Care Services Portfolio are as follows:-
- 8.2 Budgets within Care Services are closely linked and so many risks are held in common. Evidence shows that clients presenting to adult social care are increasingly complex, requiring more sophisticated packages of care, including Deprivation of Liberty orders (DoLs). The Supreme Court judgment in the Spring relating to who qualifies for a DoL is placing significant pressures on Local Authorities. At the same time, we see demographic pressures pushing the average age of our population upwards. However, many residents are living longer, healthier lives which is to be celebrated, as is the wider council policy to help maintain residents in their own homes for as long as possible.
- 8.3 The implementation of the Care Act begins on 1st April 2015. This places very significant new responsibilities on local authorities with regard to both those who may qualify for services but

also for those who care for them. The modelling of these risks has been subject to considerable scrutiny, but we will not know until implementation exactly what new pressures we will see. For example, we anticipate more carers coming forward for assessment, and, with the capping of care costs, more self funders, rightly keen to ensure their personal spend is fully captured. However, with the proposed reductions in access to some respite and holiday activities, we will also need to ensure we work closely with both carers and the cared-for to ensure we continue to help manage personal pressures. We are also able to reduce the number of extra care housing units because our community's needs become clearer.

- 8.4 We know that our partners who provide clients with care whether in residential homes or domestic, are also under very significant pressures. Containing our supplier costs will remain challenging in the coming year, and it is the case that we are very dependent on our commissioning team to manage pressures in a number of areas. These seem particularly acute in the complexities of children transitioning from children's to adults' services. A general reduction in targeted provision means we will also be ending funding to many single interest groups where individual needs will need to be picked-up through our generic programmes.
- 8.5 Costs can be best contained by improving the early advice help and guidance we give residents when they contact us, and we will bring an increasing focus to our first point of contact. This will allow us to reduce staffing in a range of back office functions but also to focus on ensuring clients are given appropriate access to universal credit and other benefits. Ever closer links with health will also improve the efficiency of the spend of the public purse, but with over £21m now held in common across health and social care, we are very dependent on health partners delivering on their responsibilities, for us to deliver ours.
- 8.6 We will see very significant changes to the universal offer in children's services with the redesign of our youth service to give a much greater focus on statutory provision. The potential loss of our universal youth service, a significant source of both referrals and early intervention activities, means that we need to rely heavily on partners to continue to signpost those most at risk to our statutory services, including into the CAF process.
- 8.7 Housing costs continue to escalate for those qualifying for temporary accommodation and we will observe this carefully, monitoring the control mechanisms we have put in place, However, this area has provided very significant pressures in the preceding years and Members will need to be aware of the particular risks here until the welfare reforms bring down costs to local authorities as well as to central government.
- 8.8 The Bromley Children's Project is playing an increasingly important role in diverting children and families from our formal services and we will need to ensure that as we look for more commercial opportunities from our children's centres we do not lose sight of their core purpose.

9. POLICY IMPLICATIONS

- 9.1 The Council's key priorities are included within the Council's "Building a Better Bromley" statement and include:
 - Safer Communities
 - A quality environment
 - Vibrant, thriving town centres
 - Supporting independence, especially of older people
 - Ensuring all children and young people have opportunities to achieve their potential
 - An Excellent Council

9.2 "Building a Better Bromley" refers to aims/outcomes that include "remaining amongst the lowest Council tax levels in Outer London" and achieving a "sustainable council tax and sound financial strategy".

10. FINANCIAL IMPLICATIONS

10.1 The financial implications are contained within the overall report.

11. LEGAL IMPLICATIONS

11.1 The Local Authorities (Standing Orders)(England) Regulations 2001 deal, amongst other things, with the process of approving the budget. Under these provisions and the constitution, the adoption of the budget and the setting of the council tax are matters reserved for the Council upon recommendation from the Executive. Sections 73-79 of the Localism Act 2011 has amended the calculations billing and precepting authorities need to make in determining the basic amount of Council tax. The changes include new sections 31 A and 31 B to the Local Government Finance Act 1992 which has modified the way in which a billing authority calculates its budget requirement and basic amount of Council Tax.

12. PERSONNEL IMPLICATIONS

12.1 The Corporate Trade Union and departmental Representatives' Forum receives regular updates on the Council's finances and the associated policy implications and challenges. Staff and their trade union representatives will be consulted individually and collectively on any adverse staffing implications arising from the budget options. Managers have also been asked to encourage and facilitate staff involvement in budget and service planning

Non-Applicable Sections:	
Background Documents: (Access via Contact Officer)	Finance Monitoring, Estimate Documents etc all held in Finance Section

					opendix 1
Line	Division	Saving Option	15/16 £'000	16/17 £'000	Full Year Saving £'000
	ALL DEPARTMENTS				
1	Essential Car Users		151	151	151
	SUB-TOTAL		151	151	151
	EDUCATION, CARE & HEALTH SI	ERVICES DEPARTMENT			
	Children's Social Care				
2	Care and Resources	Personal Education Allowances	30	30	30
3	Care and Resources	Reorganisation of the service	50	50	50
4	Safeguarding and Care Planning	Support to hard to reach groups	33	33	33
5	Referral and Assessment	Contract efficiencies already achieved	125	125	125
6	Children's Disability Services	Changes to playgroup funding	66	66	66
7	Bromley Youth Support Programme	Service redesign	50	50	50
8	Safeguarding and Quality Assurance	Contract efficiencies already achieved	38	38	38
9	Safeguarding and Quality Assurance	Reorganisation of the service	27	27	27
	SUB-TOTAL		419	419	419
	Adult Social Care				
10	Assessment and Care Management	Deletion of vacant posts	81	81	81
11	Assessment and Care Management	Contract efficiencies already achieved	181	181	181
12	Assessment and Care Management	Care management efficiencies already achieved	130	130	130
13	Assessment and Care Management	Management of demand at first point of contact	250	250	250
14	Assessment and Care Management	Charging Policy update	200	200	200
15	Direct Services	Carelink	25	25	25
16	Direct Services	Reduce extra care housing capacity	150	150	150
17	Learning Disabilities Day and Short breaks Service	Staffing restructure - vacant posts	70	70	70
18	Learning Disabilities Day and Short breaks Service	Reduce leisure activity funding	52	52	52

Line	Division	Saving Option	15/16 £'000	16/17 £'000	Full Year Saving £'000
	Learning Disabilities Day and Short breaks Service	Running expense reduction	26	26	26
<u></u>	Learning Disabilities Care Management	Restructure to achieve integration	100	100	100
	SUB-TOTAL		1,265	1,265	1,265

Line	Division	Saving Option	15/16 £'000	16/17 £'000	Full Year Saving £'000
	Commissioning Division				
21	Supporting People	Review service levels at retender for all contracts	213	213	213
22	Commissioning	Contract efficiencies	202	202	202
	SUB-TOTAL		415	415	415
	Strategic & Business Support				
23	Performance & Information	Service reconfiguration	31	31	31
24	Performance & Information	Running cost reduction	48	48	48
25	Performance & Information	Income generation	45	45	45
	SUB-TOTAL		124	124	124
	Housing Division				
26	Housing Needs	Contract reductions	51	51	51
	SUB-TOTAL		51	51	51
	TOTAL		2,425	2,425	2,425

Appendix 2

Care Services

DRAFT REVENUE BUDGET 2015/16 - SUMMARY

2013/14 Actual	Service Area	2014/15 Budget	Increased costs	Other Changes	2015/16 Draft Budget
£		£	£	£	£
	Adult Social Care				
	AIDS-HIV Grant	0	0	0	-
	Assessment and Care Management	25,474,720	450,030	Cr 1,709,570	24,215,180
	Direct Services	3,268,590	850	Cr 213,110	3,056,330
	Learning Disabilites Day and Short breaks Service	2,100,550	2,400	· · · ·	1,999,970
	Learning Disabilities Care Management	2,052,430	45,970	245,590	2,343,990
	Learning Disabilities Housing & Support	1,561,820			1,559,620
39,402,459		34,458,110	497,530	Cr 1,780,550	33,175,090
	Childrens Social Care				
763,362	Bromley Youth Support Programme	816,420	2,390	Cr 50,000	768,810
	Care and Resources	17,238,240	285,890		
	Children's Disability Services	2,432,400	32,530		
	Referral and Assessment	3,413,300	20,870		
	Safeguarding and Care Planning	3,499,360	19,940		3,351,810
	Safeguarding and Quality Assurance	1,402,040	18,310		
27,734,408		28,801,760	379,930		28,562,840
	Commissioning Commissioning	3,104,670	20,580	89,310	3,214,560
	Drugs and Alcohol	0,104,070	20,000	00,010	
	Information & Early Intervention	1,277,710	24,470	Cr 164,700	1,137,480
	Learning Disabilities Services	24,311,420	510,210		
	Mental Health Services	5,643,730	127,410	704,460	6,475,600
	PCT Funding (Social Care & Health)	0,010,100	,0	0	
	Supporting People	2,060,520	33,930	-	-
33,257,552		36,398,050	716,600		37,064,410
	Environmental Services - Housing				
		140.400	0 2 0 2 0 2 0	Cr 4 200	111 100
178,873	Housing Improvement	148,490 148,490			141,160 141,160
178,873		148,490	CI 3,030	4,300	141,100
	Operational Housing				
	Enabling Activities	Cr 1,200	0		Cr 1,200
	Housing Benefits	Cr 1,662,380	Cr 33,240	80,900	Cr 1,614,720
4,570,605	Housing Needs	4,576,710	72,790	601,840	5,251,340
3,792,129		2,913,130	39,550	682,740	3,635,420
	Strategic and Business Support Service				
331 303	Learning and Development	394,060	6,600	Cr 53,900	346,760
	Strategic and Business Support Service	2,198,140	8,750		2,141,430
2,275,848		2,592,200	15,350		2,488,190
40,000,000		40.000.450	0. 10.000	40.000	40.000.450
, ,	Public Health	12,229,150		12,680	12,229,150
	Public Health - Grant Income	Cr 12,600,800	0		Cr 12,600,800
Cr 372,792		Cr 371,650	Cr 12,680	12,680	Cr 371,650
400.000.470		101.010.000	4 000 050	0. 0.407.000	404 005 400
106,268,478		104,940,090	1,633,250	Cr 2,107,880	104,695,460
2,073,802	TOTAL NON CONTROLLABLE	1,483,000	720	Cr 1,693,440	Cr 209,720
9,882,839	TOTAL EXCLUDED RECHARGES	11,246,750	0	476,140	11,722,890
118,225,119	PORTFOLIO TOTAL	117,669,840	1,633,970	Cr 3,325,180	116,208,630

CARE SERVICES PORTFOLIO

SUMMARY OF BUDGET VARIATIONS 2015/16

Ref			VARIATION IN 2015/16 £'000 £'000		В	RIGINAL UDGET 014/15 £'000	
1	2014/15 BUDGET			1	17,670		
2	Increased Costs				1,634		
3 4	Full Year Effect of allocation of Central Contingency Increase in annual insurance premiums Bed & Breakfast (from provision for homelessness)		4 653		657		
	Movement Between Portfolios / Departments / Divisions EFA funding adjustment - transfer to Education Fallout of 2014/15 s256 Invest to Save Schemes: - Children's Social Care Invest to Contain Year 3 (offset by variation in recharge) Reduced amount of former EFA funding for clients with Learning Disabilities:	Cr)	28 24		037		
		Cr	162 162	Cr	4	Cr	1,561 1,561
	Real Changes						
8	Real Changes Funded by Savings Invest to Contain Scheme Year 3 - CSC Placements			Cr	142		24
9	Savings identified for 2015/16 as part of the 2014/15 Budget process Invest to save - day care opportunities (06/02/13)			Cr	58		1,241
	New Savings Identified for 2015/16 (subject to approval)						
16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	Contract efficiencies already achieved Care management efficiencies already achieved Management of demand at first point of contact Charging Policy update Carelink Reduce extra care housing capacity LD Short Breaks staffing restructure - vacant posts LD Day Services running expense reduction LD Restructure to achieve integration Commissioning - Contract efficiencies Supporting People - review service levels at retender for all contracts Operational Housing Contract Reductions Reduce the provision of Personal Education Allowances Care & Resources - Reorganisation of the service Safeguarding & Care Planning - Support to hard to reach groups Referral and Assessment - Contract efficiencies already achieved Children's Disability Services - Changes to playgroup funding Bromley Youth Support Programme - Service redesign Safeguarding & Care Planning - Contract efficiencies already achieved Safeguarding & Quality Assurance - Reorganisation of the service Performance & Information - service reconfiguration Performance & Information - running cost reduction	Cr C	81 181 130 250 200 25 150 70 26 100 254 213 51 30 50 33 125 66 50 38 27 31 48 45			Cr	5,105 181 528 5,105 3,841 92 1,315 649 1,451 923 2,505 2,061 51 233 33 614 66 943 38 909 426 426 426
	5	Cr	151	Cr	2,425		317

CARE SERVICES PORTFOLIO

SUMMARY OF BUDGET VARIATIONS 2015/16

Ref			VARIA 201	TIO 5/16		BUD	GINAL DGET I4/15
	Other Real Changes:						
35	Reduction in Housing Benefit Admin Subsidy		186				
36	Net Real reduction in Admin Subsidy 2015/16	Cr	105				
37	Social Housing Fraud Grant - Expenditure	Cr	100				100
38	Social Housing Fraud Grant - Income		100			Cr	100
39	Local Reform & Community Voices Grant						
	- Expenditure	Cr	125				
	- Income		125	-			
					81		
40	Variations in Capital Charges			Cr	1,696		
41	Variations in Recharges				488		
42	Variations in Rent Income				4		
43	2015/16 DRAFT BUDGET			1	16,209	-	

CARE SERVICES PORTFOLIO

Notes on Budget Variations in 2015/16

Ref Comments

2 Increased Costs (Dr 1,634k)

Inflation of £1,633K has been allocated to budgets for contracts, SLAs, running expenses and income. At this point in time, no inflationary increase has been applied to salaries budgets in relation to 2015/16.

3 Increase in annual insurance premiums (Dr £4k)

An overall allocation of £116k was made from the contingency in respect of the insurance premium increase arising from the tendering of the Council casualty insurance arrangements in 2014. This was reported to the Executive & Resources PDS Committee on 5th June 2014. Of the £116k, the £4k shown here relates to Care Services Portfolio.

Bed & Breakfast (from provision for homelessness) - Dr £653k
 As reported to the Executive on 15th October 2014, there are significant pressures in relation to homelessness and the impact of the recession / welfare reform on the temporary accommodation budget.

The £653k built into the Operational Housing Division 2015/16 draft budget represents the continuation of the funding allocated in 2014/15. Further funding is currently held in the central contingency for new cost pressures.

Movement Between Portfolios / Departments / Divisions

- 5 <u>EFA Funding Adjustment Transfer to Education (Cr 28k)</u> This adjustment relates to inflation on the former EFA-funded element of Learning Disabilities placements.
- 6 <u>Children's Social Care Invest to Contain Year 3 (Dr £24k)</u> The invest to contain scheme in Children's Social Care was approved by the Executive on 20th June 2012, this adjustment relates to the realignment of budgets in respect of year 3 (2014/15), the final year of the investment.
- 7 Reduced amount of former EFA funding for clients with Learning Disabilities (Cr £162k & Dr £162k) As part of the Dedicated Schools Grant allocation for 2013/14, funding for SEN support in Further Education Colleges transferred from the Education Funding Agency to LBB. This included an element of Social Care support. The amount required for 2015/16 for this element is estimated to be £162k lower than 2014/15. The costs are fully recharged back to Education budgets so there is a compensating variation in recharges.

The Older People's day opportunities invest to save scheme was approved by the Executive on 6th February 2013 and this adjustment relates to the realignment of budgets in respect of year 2 (2014/15), the final year of the "investment". An equivalent debit is included in the variation in recharges figure shown below.

Real Changes

8

9

Savings identified for 2015/16 as part of the 2014/15 Budget process Invest to Contain Scheme Year 3 - CSC Placements (Cr £142k)

- Savings identified for 2015/16 as part of the 2014/15 Budget process
 - Older People Day Opportunities (Cr £58k)

The Older People's day opportunities invest to save scheme was approved by the Executive on 6th February 2013 and this adjustment relates to the further saving of £58k as a result of the changes.

New Savings Identified for 2015/16 (subject to approval)

- 10 Deletion of vacant posts in Adult Social Care (Cr £81k)
- 11 Contract efficiencies already achieved (Cr £181k)
- 12 Care management efficiencies already achieved (Cr £130k)
- 13 Management of demand at first point of contact (Cr £250k)
- 14 Charging Policy update (Cr £200k)
- 15 Carelink (Cr £25k)
- 16 Reduce extra care housing capacity (Cr £150k)
- 17 LD Short Breaks staffing restructure vacant posts (Cr £70k)
- 18 LD Day Services running expense reduction (Cr £26k)
- 19 LD Restructure to achieve integration (Cr £100k)
- 20 <u>Commissioning Contract efficiencies (Cr £254k)</u> Savings on £254k will be generated by achieving efficiencies on contracts within ECHS Commissioning Division budgets
- 21 Supporting People review service levels at retender for all contracts (Cr £213k) It is intended that £213k will be saved by reviewing service levels for all contracts at the point of re-tendering.
- 22 <u>Contract Reductions Cr £51k</u> This relates to a review of contracts within Operational Housing in 2014/15 and 2015/16.
- 23 Reduce the provision of Personal Education Allowances (Cr £30k)
- 24 Care & Resources Reorganisation of the service (Cr £50k)
- 25 Safeguarding & Care Planning Support to hard to reach groups (Cr £33k)
- 26 Referral and Assessment Contract efficiencies already achieved (Cr £125k)
- 27 Children's Disability Services Changes to playgroup funding (Cr £66k)
- 28 Bromley Youth Support Programme Service redesign (Cr £50k)
- 29 Safeguarding & Care Planning Contract efficiencies already achieved (Cr £38k)
- 30 Safeguarding & Quality Assurance Reorganisation of the service (Cr £27k)
- 31 Performance & Information service reconfiguration (Cr £31k)
- 32 Performance & Information running cost reduction (Cr £48k)
- 33 Performance & Information income generation (Cr £45k)
- 34 Essential car users (Cr £151k)
- 35 & 36 <u>Reduction in Housing Benefit Admin Subsidy Dr £186k & Cr £105k</u> These relate to the reduction of Housing Benefit admin subsidy for administration costs in 2015/16.
- 37 & 38 Social Housing Fraud Grant Dr £100k & Cr £100k

Bromley successfully bid for Social Housing Fraud Grant funding from the DCLG and was awarded the maximum funding available for the two year period 2013/14 to 2014/15 (£200k in total). The Executive approved the drawdown on the 20th November 2013.

39 Local Reform & Community Voices Grant (Cr £125k & Dr £125k)

The Local Reform and Community Voices Grant was allocated for a two year period and 2014/15 was the final of the two years. The grant was allocated to fund various responsibilities transferred from the NHS to local authorities from April 2013 (additional DoLS, Healthwatch, Independent Complaints Advocacy and Independent Mental Health Advocacy). At this stage there is no indication whether the grant will continue in 2015/16 and it has been assumed for the draft budget that it will fall out. Consideration will need to be given to the funding of these services if the grant or alternative funding is not available for 2015/16.

The total amount of the grant for 2014/15 was £215k but only £125k of that was held in the ECHS budget with the remainder being held in the contingency.

Variations in Capital Charges, Recharges & Insurance

40 Variations in Capital Charges (Cr £1,696k)

The variation in capital charges is due to a combination of the following:

(i) Depreciation – the impact of revaluations or asset disposals in 2013/14 (after the 2014/15 budget was agreed) and in the first half of 2014/15;

(ii) Revenue Expenditure Funded by Capital Under Statute (REFCUS) – mainly due to a significant general increase in the value of schemes in our 2015/16 Capital Programme that do not add value to the Council's fixed asset base.

(iii) Government Grants – mainly due to a significant increase in credits for capital grants receivable in respect of 2015/16 Capital Programme schemes, which are used to finance expenditure that is treated as REFCUS.

These charges are required to be made to service revenue accounts, but an adjustment is made below the line to avoid a charge on Council Tax.

- 41 <u>Variations in Recharges (Dr £488k)</u> Variations in recharges are offset by corresponding variations elsewhere and have no impact on the overall position.
- 42 Variations in Rent Income (Dr £4k)

This relates to the reallocation of rental income budgets across departments / portfolios. There are corresponding adjustments in other portfolios and these net out to zero in total.

Care Services
DRAFT REVENUE BUDGET 2015/16 - SUBJECTIVE SUMMARY

				Supplies and	Third Party	Transfer		Controllable	Capital Charges/	Total	Capital Charges/	Repairs, Maintenance	Property Rental	Not Directly		Total Cost of		Total Net
Service area	Employees	Premises	Transport	Services	Payments	Payments	Income	Recharges	Financing	Controllable	Financing	& Insurance	Income	Controllable	Recharges In	Service	Recharges Out	Budget
	£	£	£	£	£	£	£			£	£				£	£	£	£
Adult Social Care																		
AIDS-HIV Grant	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	
Assessment and Care Management	5,680,560	54,880	48,670	118,500	31,363,220	2,698,720	Cr 11 933 270	Cr 3,816,100	0	24,215,180	48,000	130,520	Cr 151,020	27,500	6,998,130	31,240,810	Cr 2,974,460	28,266,350
Direct Services	3,825,170	14,310	691,490		38,650			Cr 1,103,940	0	3,056,330	,	7,090	0	7,090		3,142,520		
Learning Disabilites Day and Short Breaks Service	1,848,260	111,890	39,160		0		Cr 100,830	0	0	1,999,970	70,000		0	117,980		3,070,740		
Learning Disabilities Care Management	.,	0	0	0	897,160	1,645,390		0	0	2,343,990		0 0	0	0	0	2,343,990	0	2,343,990
Learning Disabilities Housing & Support	1,570,040	29,680	11,020	83,950	0		Cr 135,070	0	0	1,559,620	15,000	42,970	0	57,970	12,940	1,630,530	Cr 1,640,220	Cr 9,690
5 <u>5</u>	12,924,030	210,760	790,340		32,299,030	4,344,110		Cr 4,920,040	0	33,175,090	133,000		Cr 151,020	210,540	-	41,428,590		28,973,670
Childrens Social Care																		
Bromley Youth Support Programme	908,660	41,370	9,540	39,580	91,170	0	Cr 292,000	Cr 29,510	0	768,810	C	12,690	0	12,690	186,070	967,570	0	967,570
Care and Resources	3,620,960	21,670	65,520	657,800	13,260,500	1,418,720	Cr 1,043,470	Cr 610,020	0	17,391,680	1,000	3,300	0	4,300		19,368,260	0	19,368,260
Children's Disability Services	801,840	0	16,950	35,200	1,295,030	451,120	Cr 222,130	0	0	2,378,010	C	0 0	0	0	231,540	2,609,550	0	2,609,550
Referral and Assessment	2,410,170	0	28,870		453,500	54,020		Cr 18,910	0	3,340,460	C	0 0	0	0	439,000	3,779,460	Cr 56,460	3,723,000
Safeguarding and Care Planning	2,471,360	0	29,530	147,520	554,260	78,320	Cr 63,320	134,140	0	3,351,810	C	24,730	Cr 6,070	18,660	392,780	3,763,250	0	3,763,250
Safeguarding and Quality Assurance	1,167,980	0	Cr 55,400	130,090	42,280	0	Cr 29,510	76,630	0	1,332,070	c	14,550	0	14,550	1,249,270	2,595,890	0	2,595,890
	11,380,970	63,040	95,010	1,423,000	15,466,740	2,002,180	Cr 1,650,430	Cr 447,670	0	28,562,840	1,000	55,270	Cr 6,070	50,200	4,470,940	33,083,980	Cr 56,460	33,027,520
Commissioning																		1
Commissioning	2,106,660	0	5,530	37,970	980,080	36,160	Cr 94,510	142,670	0	3,214,560	C	2,110	0	2,110	2,678,400	5,895,070	Cr 1,254,160	4,640,910
Drugs and Alcohol	0	0	0	0	0	0	0	0	0	0	C	0 0	0	0	0	0	0	0
Information & Early Intervention	0	0	0	0	1,465,100	0	Cr 327,620	0	0	1,137,480	C	0 0	0	0	126,570	1,264,050	0	1,264,050
Learning Disabilities Services	0	0	0	0	28,464,310	0	Cr 2,523,050	Cr 1,440,190	0	24,501,070	C	0 0	0	0	3,524,260	28,025,330	0	28,025,330
Mental Health Services	0	0	0	0	7,440,360	133,950	Cr 1,091,190	Cr 7,520	0	6,475,600	1,000	23,290	Cr 107,260	Cr 82,970	174,170	6,566,800	Cr 1,410,070	5,156,730
PCT Funding (Social Care & Health)	0	0	0	0	0	0	Cr 4,260,000	4,260,000	0	0	C	0 0	0	0	0	0	0	0
Supporting People	0	0	0	0	1,426,520	0	0	309,180	0	1,735,700	C	0 0	0	0	46,850	1,782,550	0	1,782,550
	2,106,660	0	5,530	37,970	39,776,370	170,110	Cr 8,296,370	3,264,140	0	37,064,410	1,000	25,400	Cr 107,260	Cr 80,860	6,550,250	43,533,800	Cr 2,664,230	40,869,570
Environmental Services - Housing																		
Housing Improvement	399,610	35,870	4,800	4,250	0		Cr 206,170		0	141,160				Cr 599,800	-	137,220		
	399,610	35,870	4,800	4,250	0	0	Cr 206,170	Cr 97,200	0	141,160	Cr 600,000	200	0	Cr 599,800	595,860	137,220	Cr 231,860	Cr 94,640
										1					1			1
Operational Housing						_					_							
Enabling Activities	0	0	0	0	0		Cr 1,200	0		Cr 1,200	C	0	0	0	289,540	288,340	0	288,340
Housing Benefits	0	0	0	1,014,780	0	134,383,740		0	0	Cr 1,614,720	C	0 0	0	0	3,714,740	2,100,020	0	2,100,020
Housing Needs	2,042,410	94,930	22,160	702,570	8,509,970		Cr 5,706,750	Cr 413,950	0	5,251,340	200,000	1	0	208,410	1,026,180	6,485,930		6,155,990
	2,042,410	94,930	22,160	1,717,350	8,509,970	134,383,740	Cr 142,721,190	Cr 413,950	0	3,635,420	200,000	8,410	0	208,410	5,030,460	8,874,290	Cr 329,940	8,544,350
Strategic and Business Support Service								1								1		1
Strategic and Business Support Service Learning and Development	422 420			49,760		ō	Cr 85,670	Cr 30.750		346 760		190		190	_	346,950	Cr 394,350	Cr 47,400
Strategic and Business Support Service	422,420 1,588,940	0	4,290	49,760 470,670	181,200		Cr 85,670 Cr 66,430	-	0	346,760 2,141,430		0 1,600	0	190		346,950 6,374,900		4,935,560
Grategic and Business Support Service	2,011,360	0	4,290		181,200		Cr 66,430 Cr 152,100		0	2,141,430		0 1,600 1,790	0	1,600		6,374,900		4,935,560
	2,011,360	U	4,290	520,430	101,200	U	01 152,100	0, 70,990	- U	2,400,190		, 1,790	U	1,790	4,231,870	0,721,850	0, 1,000,090	4,000,160
Public Health	1,671,060		4,500	126,040	8,375,580	0	Cr 12,851,040	2,302,210		Cr 371,650			0	•	371,650		<u>م</u>	
	1,071,060	0	4,500	120,040	0,373,380	U	12,051,040	2,302,210	- U	5/ 3/ 1,650		, ,	U	U	371,650		U	
										1					1			1 1
	32.536.100	404.600	926.630	4,413,730	104.608.890	140.900.140	Cr 178,935,130	Cr 389.500	0	104.695.460	Cr 265.000	319,630	Cr 264,350	Cr 209,720	29,293,990	133,779,730	Cr 17,571,100	116.208.630
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Agenda Item 12a

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Agenda Item 13a

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Agenda Item 13b

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