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DATE: 22 January 2024

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

Councillor Mark Brock (Chairman)
Councillor Felicity Bainbridge (Vice-Chairman)
Councillors Jessica Arnold, Kim Botting FRSA, Graeme Casey, Robert Evans,
Dr Sunil Gupta FRCP FRCPATH, Mike Jack, David Jefferys and Kevin Kennedy-
Brooks

Non-Voting Co-opted Members
Jo Findlay, Lived Experience
Michelle Harvie, Carer
Stacey Agius, Safeguarding and Special Educational Needs

A meeting of the Adult Care and Health Policy Development and Scrutiny Committee
will be held at Bromley Civic Centre, Stockwell Close, Bromley, BR1 3UH on
TUESDAY 30 JANUARY 2024 AT 7.00 PM

TASNIM SHAWKAT
Director of Corporate Services & Governance

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

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

A G E N D A

PART 1 AGENDA

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

STANDARD ITEMS

1 **APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS**

2 **DECLARATIONS OF INTEREST**

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

In accordance with the Council's Constitution, members of the public may submit one question each on matters relating to the work of the Committee. Questions must have been received in writing 10 working days before the date of the meeting – by **5pm** on **Tuesday 16th January 2024**.

Questions seeking clarification of the details of a report on the agenda may be accepted within two working days of the normal publication date of the agenda – by **5pm** on **Wednesday 24th January 2024**.

4 **MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 21ST NOVEMBER 2023** (Pages 5 - 18)

5 **WORK PROGRAMME AND MATTERS OUTSTANDING** (Pages 19 - 26)

HOLDING THE ADULT CARE AND HEALTH PORTFOLIO HOLDER TO ACCOUNT

6 **UPDATE FROM THE DIRECTOR OF ADULT SOCIAL CARE**

7 **ADULT CARE AND HEALTH PORTFOLIO DRAFT BUDGET 2024/25** (Pages 27 - 44)

POLICY DEVELOPMENT AND OTHER ITEMS

8 **ADULT SOCIAL CARE TRANSFORMATION PROGRAMME** (Pages 45 - 72)

9 **CONTRACT MONITORING REPORT - EXTRA CARE HOUSING SCHEMES** (Pages 73 - 82)

10 **QUESTIONS ON THE ADULT CARE AND HEALTH PDS INFORMATION BRIEFING**

The briefing comprises:

- Minutes from the Health Scrutiny Sub-Committee meeting held on 21st November 2023
- Contract Register

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?CId=559&Year=0>

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

This item will only be debated if a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss. 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.

12 EXEMPT MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 21ST NOVEMBER 2023 (Pages 83 - 84)

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

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ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Minutes of the meeting held at 7.00 pm on 21 November 2023

Present:

Councillor Mark Brock (Chairman)
Councillor Felicity Bainbridge (Vice-Chairman)
Councillors Jessica Arnold, Kim Botting FRSA,
Graeme Casey, Dr Sunil Gupta FRCP FRCPath, Christine
Harris, Mike Jack, David Jefferys and Kevin Kennedy-
Brooks

Jo Findlay, Michelle Harvie and Stacey Agius

Also Present:

Councillor Diane Smith, Portfolio Holder for Adult Care and Health
and Councillor Jeremy Adams

31 APOLOGIES FOR ABSENCE AND NOTIFICATION OF SUBSTITUTE MEMBERS

Apologies for absence were received from Councillor Robert Evans and
Councillor Christine Harris attended as substitute.

Apologies for lateness were received from Councillor Kevin Kennedy-Brooks.

32 DECLARATIONS OF INTEREST

In respect of Item 12, Councillor David Jeffreys declared that, by virtue of his
position as Chairman of the Health and Wellbeing Board, he was a Member of
the Bromley Adult Safeguarding Board. In respect of Item 13 (Annual
Monitoring Report – Dementia Post Diagnosis Support Services), Councillor
Jefferys declared that he worked with a company who developed dementia
drugs.

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

One oral question was received from Councillor Jeremy Adams and is
attached at Appendix A.

34 MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 5TH SEPTEMBER 2023

The minutes of the meeting held on 5th September 2023 were agreed, and signed as a correct record.

35 WORK PROGRAMME AND MATTERS OUTSTANDING

Report CSD23122

The Committee considered a report setting out matters outstanding from previous meetings and the proposed work plan for 2023/24.

The Chairman noted that a briefing on the reintroduction of a scheme of visits for ACH PDS Committee Members to care providers in the borough had been tabled.

The Committee agreed to go paperless as far as practicable from the next meeting. It was noted that an email would be circulated to all Members of the Committee to provide the opportunity to opt-out and request paper copies of agendas. The Chairman emphasised that the option to request paper copies would always be available to Members.

RESOLVED that the update be noted and the Committee go paperless, where practicable, for future meetings.

36 UPDATE FROM THE DIRECTOR OF ADULT SOCIAL CARE

The Director of Adult Social Care gave an update to Members on work being undertaken across the Adult Social Care department.

The Director of Adult Social Care advised that there were a number of issues that needed to be brought to Members' attention, which largely related to items on the agenda.

At the last meeting it was reported that the Assistant Director for Safeguarding, Practice and Provider Relations team had moved into the new offices at Churchill Court – the team had settled in well and were really appreciating being in new, shared surroundings. Better team working was being reported, and the ease of communication meant less need for formal meetings and a real sense of how good it was to work in modern and pleasant surroundings.

Members were advised that preparation for the CQC Assurance visit continued. They were gradually working through those areas identified as needing more attention and were gaining confidence in their preparation. Whilst this had flagged some areas for attention, it was important that they had an honest appraisal of the current position and the work they need to do. Work was continuing on reviewing the hospital discharge arrangements; work to better support carers; use of technology and they were moving on to reviewing the work around Safeguarding practice.

The first phase of work with the Social Care Institute for Excellence had concluded and they were working up a bid for some internal transformation funding to move onto the next steps with the programme. This had been an exciting piece of work, funded by grant funding from government – the next stage would require some internal funding, but delivered efficiencies both in terms of cost and capacity. It was noted that this could be reported on at the next meeting.

The Director of Adult Social Care advised that their continued to be a number of challenges related to obtaining care at an affordable rate to the Council, which was shown in the later budget report. Whilst it was acknowledged that costs had risen, the Council had invested significantly in the increased fees paid for care, but providers were still requesting more. They were working on a detailed report to present to the Portfolio Holder, Chief Executive and Director of Finance to quantify this and present options for managing this, in the event that further money was not made available by central government. It was highlighted that this was not just a Bromley issue.

The department were working to develop robust efficiency options for the financial year 2024/25 and onwards, and these would be presented in detail at the next meeting. However, to give members some headlines, they were currently considering the following areas for exploration (total options circa £1.8m):

- Strategic Needs assessment of Supported Housing offer;
- Extend Extra Care Housing offer;
- Direct Payment in place of Discharge to Assess Funding;
- Reduction in Agency Staffing spend;
- Digital Transformation - CareLink, Self-Assessment, Online information and advice;
- Enhanced Domiciliary Care offer;
- Review of Ordinary Residence application;
- Use of Disabled Facilities Grant
- Enhanced Reablement offer to reduce ongoing need; and,
- Better use/evidence of prevention.

The Director of Adult Social Care noted that there was an urgent report to be discussed in the closed section of the agenda.

RESOLVED that the update be noted.

37 ADULT CARE AND HEALTH PORTFOLIO PLAN 2023-2024 - HALF-YEARLY UPDATE

Report ACH23-048

The Committee considered a report providing an update on the Adult Care and Health Portfolio Plan for the first half of 2023/24.

The Adult Care and Health Portfolio Plan was refreshed each year in line with the Council's Transformation Programme and the Corporate Strategy 'Making Bromley Even Better'. The Plan also aligned with the new Adult Social Care Strategy. Within each priority were a number of statements which were underpinned by actions and measures of success within the work of Adult Care and Health Services. The first six months of 2023/24 had seen progress on the Portfolio Plan. Work also continued as part of the Transforming Adult Social Care programme to develop the working practices of front-line officers and the structure in which they operated to ensure best value support and services for vulnerable residents. The Portfolio Plan 2023-24 focuses on two of the ambitions from Making Bromley Even Better which reported into this Portfolio:

- Ambition 2 - For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices; and,
- Ambition 5 - To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.

Members noted that progress had been made across all actions within the Portfolio Plan which reflected the partnership work undertaken to deliver and commission services.

In response to a question, the Strategy Officer explained that discussions at the Residents' Voice Group had revealed the volume of engagement with and feedback from service users and carers that had not been previously bought together. As such, the establishment of the Residents' Voice Group had been a positive step.

A Member highlighted the potential role of the Business Improvement Districts (BIDs) to support and encourage independence by improving access to the high street and shopping. It was agreed that consideration should be given to taking this forward.

RESOLVED that the progress on the actions associated with the Adult Care and Health Portfolio Plan for the first half of 2023/24 be noted.

38 ADULT CARE AND HEALTH SERVICES RISK REGISTER - QUARTER 2 2023/24

Report ACH23-049

The Committee considered a report providing the current Adult Care and Health Services' Risk Register – Quarter 2 2023/24 and the existing controls in place to mitigate the risks.

Since June 2023, when the ACH PDS last saw the Risk Register, two new risks had been added:

- Risk 13 – Adult Transport; and,
- Risk 14 – Community Equipment

The following changes had been made to the gross and net (current) risks:

- Risk 4 – Deprivation of Liberty - change of gross risk from 16 to 12.

The Committee noted that all risks across the Service had been managed through mitigation.

In respect of the Public Health risk, the Director of Public Health explained that within the Public Health community there were ongoing risks, particularly around Covid and the funding for services, as the grant was awarded on an annual basis. It was recognised that a cautious approach was being taken but this allowed the position to be closely monitored.

In response to a question concerning risks around funding, the Director of Adult Social Care confirmed that, on behalf of the Council, the Director of Finance lobbied for a fair share for Bromley and, nationally, Directors of Adult Social Care lobbied for fair funding for Adult Social Services.

The Committee noted that recruitment was an ongoing risk. There was a great deal of competition across London and staffing and recruitment required careful monitoring.

In respect of the risk around failure to provide effective Learning Disability Services, the Director of Adult Social Care confirmed that through the efficiency programme there were a number of focus areas in relation to learning disability services. There was a focus on providing appropriate local services for young people transitioning into Adult Social Care through the further development of in-borough capacity.

RESOLVED that the current Adult Care and Health Services' Risk Register and the existing controls in place to mitigate the risks be noted.

39 TACKLING LONELINESS STRATEGY ACTION PLAN 2022-2026 UPDATE

Report ACH23-054

The Committee considered a report providing an update on the delivery of the Tackling Loneliness Strategy Action Plan. The Tackling Loneliness Strategy was approved by the Adult Care and Health Policy Development and Scrutiny Committee in November 2021 and was launched later that year. At the time, Members were advised that an updated action plan would be brought to the Committee with evidence of progress throughout the lifetime of the strategy.

The Principal Loneliness Champion informed Members that through the Tackling Loneliness Workshops over 250 professionals in Bromley had been trained. Work was underway to get accreditation to enable the workshops to

form part of professional development. A number of events had taken place across the Borough for “Silver Sunday” and “Befriending Week” had taken place at the start of November. Finally, the Principal Loneliness Champion reported that a meeting had taken place with a group of South Korean Social Workers who had researched the work being done by Bromley in relation to tackling loneliness and had wanted to discuss initiatives around how to connect people.

In response to a question around how the impact of the initiatives could be measured, the Principal Loneliness Champion, explained that a resident survey had been developed and the aim of this was to analyse the impact of the initiatives. The survey was quantitative as well as qualitative and partners were helping to trail the survey. The results from the survey would support the service to obtain quantifiable data which would be reported back to the Committee, it would also enable the Service to develop an evidence base of the impact of the loneliness initiatives and feed into national research.

In response to a question, Members noted that the Team were working with the Business Improvement Districts (BIDs) around the support they could provide to the Tackling Loneliness Strategy.

In response to concerns raised around whether there would be suitable premises to deliver some of the initiatives, the Assistant Director for Strategy and Performance explained that a response had been provided to the request for cheap and freely accessible premises and the list of suitable premises could be shared with Members of the Committee upon request.

RESOLVED that the progress made in delivering the Tackling Loneliness Strategy Action Plan 2022–2026 be noted.

40 PRE-DECISION SCRUTINY OF ADULT CARE AND HEALTH PORTFOLIO HOLDER REPORTS

The Committee considered the following reports where the Adult Care and Health Portfolio Holder was recommended to take a decision:

A VARIATION TO THE PRIMARY AND SECONDARY INTERVENTION SERVICE CONTRACT (PART 1)

Report ACH23-053

The Committee considered a report requesting approval to vary the current Primary and Secondary Intervention Service (PSIS) Contract. This service (also known as Bromley Well) was managed by Bromley Third Sector Enterprise (BTSE). The London Borough of Bromley was the lead commissioning organisation for this contract acting on the behalf of both the Council and the South East London Integrated Commissioning Board (ICB) Bromley.

The PSIS service consisted of nine pathways with a single point of access providing a triage function and eight specialist service pathways for those that needed further support following triage. The contract variation would revise the service offer of one of the nine PSIS service pathways. This pathway was the Elderly Frail Pathway and the contract variation would change the existing service offer and the PSIS contract in the following ways:

- i. Expand the capacity of the current Handyperson service pathway to include the activity that had been previously commissioned and funded through the ICB;
- ii. Enable the one-off purchase of an additional van for use by additional handyperson, which was not currently part of the PSIS contract;
- iii. Incorporate the Frailty Navigator service, which was currently not part of the PSIS contract; and,
- iv. Enable the allocation of additional funds to the PSIS contract over a 4.5-year period.

The current PSIS contract commenced on 1st October 2022 and was a 5-year contract which expired on 30th September 2027, with the option to extend for another 2 years to 30th September 2029. The contract variation would mean an increase in contract value over the whole life of the contract. The cost of this variation and full contract costs were included in accompanying Part 2 report.

RESOLVED that the Portfolio Holder be recommended to agree the variation to the PSIS contract.

B BUDGET MONITORING 2023/24 Q2

Report FSD23071

The Committee considered a report providing the budget monitoring position for 2023/24 for the Adult Care and Health Portfolio, based on activity up to the end of September 2023.

In response to a question, the Director of Adult Social Care confirmed that with respect to the overspend in mental health, there were ongoing pressures around increasing prices, but the Team were working to make up the pace. The intention was that the Trust would work to recover the position.

Members noted that the forecast was the full-year projection and was therefore profiled. The full-year effect was based on known funding and it was therefore hoped that the position would improve.

RESOLVED that the Portfolio Holder for Adult Care and Health be recommended to note the projected overspend of £1,501k on controllable expenditure based on information as at September 2023.

41 PRE-DECISION SCRUTINY OF EXECUTIVE REPORTS

A SECTION 31 AGREEMENT BETWEEN LONDON BOROUGH OF BROMLEY AND OXLEAS NHS FOUNDATION TRUST FOR THE INTEGRATED PROVISION OF MENTAL HEALTH SERVICES

Report ACH23-052

The Committee considered a report seeking Executive approval to extend the partnership arrangement for the provision of Adult Mental Health Services between the London Borough of Bromley and Oxleas NHS Trust. The extension would enable the partners to continue to operationalise the required improvements that were set out in the s31 Review (2021), and ultimately enable the Council to recommend a service model for the longer term. The current agreement was due to expire on 30th November 2024.

On 21st July 2004, the Council's Executive granted permission for the London Borough of Bromley to enter into an agreement with Oxleas NHS Foundation Trust for the provision of Adult Mental Health services. The agreement established the framework for Oxleas NHS Foundation Trust to undertake their role as the lead provider for Bromley's Adult Mental Health Services (including the Community Mental Health Team), permissible under s31 of the Health Act 1999. Subsequently the London Borough of Bromley and Oxleas NHS Foundation Trust established a pooled budget to deliver the service and transferred/seconded staff to the new arrangement.

Members noted that this was a very specialist service and in response to a question, the Head of Community Living Commissioning confirmed that alternative options were not currently being considered although an options appraisal was always undertaken.

The Committee congratulated Oxleas NHS Foundation Trust for their recent success in winning the prestigious Trust of the Year award.

RESOLVED that the Executive be recommended to:

- i.) Authorise that the Council enters into a 2 year (extension) agreement with Oxleas NHS Foundation Trust resulting in the continuance of their role as the lead provider of Adult Mental Health Services including operational management. Resulting in an estimated cost of £3,787,914 over the two year extension period (up to 30th November 2026);**
- ii.) Agree the extension of the pooled budget provision, the value of which will continue to be in line with CPI and the National Minimum Wage (which preserves the current value for money arrangement);**
- iii.) Agree that the power to sign this agreement and to finalise negotiations is delegated to the Chief Officer (Director of Adults Social Care) as the agreement primarily relates to staff who would normally be directly located in the Adults Social Care Directorate; and,**

- iv.) **Note that the Integrated Commissioning Board supports and has consented to the Trust retaining these arrangements with the Council.**

**42 BROMLEY SAFEGUARDING ADULTS BOARD 2022/23
ANNUAL REPORT**

Report ACH23-056

The Committee considered an overview of the Bromley Safeguarding Adults Board's (BSAB) Annual Report 2022/23.

The Chairman welcomed the Independent Chairman of the Bromley Safeguarding Adult Board, Teresa Bell and Bulent Djouma, Bromley Safeguarding Adult Board Manager, to the meeting.

A video providing an overview of the Annual Report was shared with Members and can be viewed via the following link: [BSAB Annual Report 2022-23](#)

Members noted the tremendous volume of work completed by the BSAB and paid tribute to the work of the Independent Chairman.

In response to a question, the Independent Chairman of the Board confirmed that there was a recognition of gaps that could emerge in the level of support from mental health services for vulnerable families during periods of transition from Children's to Adult's Services. There was good representation from Bromley Mencap on the Board and consideration could be given to any additional support that could be given to vulnerable families. The Independent Chairman explained that an area of focus for the Board was to ensure that there was no disruption to care arising from transition.

In response to a further question, the Director of Adult Social Care provided assurances that transition from Children's to Adult's Services did not have a negative impact on waiting times for services. In addition, for the past year the Council had been operating a 0-25 Service which sat within Children's Services. This helped to facilitate better management of transition.

A Member highlighted that, in terms of transition, there was also flexibility within Health Services to ensure services to young adults were not disrupted by transition.

RESOLVED that the Bromley Safeguarding Adults Board's 2022/23 Annual Report be noted.

**43 ANNUAL MONITORING REPORT - DEMENTIA POST
DIAGNOSIS SUPPORT SERVICES (DEMENTIA HUB)**

Report ACH23-036

The Committee considered a report providing a summary of how the Dementia Post Diagnosis Support Service had performed over the last 12 months in addressing the requirements of the specification. This demonstrated how community-based support was a key element in meeting the Council's statutory duties by preventing or delaying the need for more expensive accommodation / health-based provision, whilst meeting the primary aim of achieving the best possible health and wellbeing outcomes for service users and their carers.

The report was presented in order to meet the requirement regarding monitoring updates for Policy Development and Scrutiny Committees. The Dementia Post Diagnosis Support, (Dementia Hub) Service was currently provided by Bromley, Lewisham, and Greenwich (BLG) Mind, in partnership with Age UK Bromley, with BLG Mind as the Lead organisation. The Dementia Hub was a specialist service that delivered a one stop support service for adults who had a diagnosis of dementia, their carers, and the professionals who supported them. The current contract was awarded to BLG Mind on 1st July 2020 – 30th June 2025, with the option to extend for a further 2 years.

Members noted that the contact was working well, and the Service had developed a good relationship with the provider.

In response to a question around respite care for families caring for people living with dementia, the Integrated Strategic Commissioner confirmed that there were a couple of options with the assessment identifying the most suitable package of care. A respite home service was available as was overnight stay respite. The Dementia Hub also provided opportunities for carers to have a break. It was noted that there was lots going on and there was a vibrant offer in the Borough.

In response to a further question, the Committee noted that there were a number of referral pathways with referrals generally addressed within 10 days.

It was agreed that details of the Befriending Service would be provided to Members who could share the information in the wider community.

In response to a question, the Director of Adult Social Care confirmed that following the winter, the Saxon Centre would be closing for essential maintenance. Officers were currently working with Age Concern to ensure that support continued to be provided to service users during the period of the closure.

RESOLVED that the contract monitoring report on the performance of BLG Mind be noted.

44 CONTRACTS REGISTER (PART 1)

Report ACH23-051

The Committee considered an extract from the September 2023 Contracts Register which was presented to Members for detailed scrutiny. The Contracts Register contained in Part 2 of the agenda included a commentary on each contract to inform Members of any issues or developments. It was highlighted that no contracts had been flagged as a concern during this quarter.

RESOLVED that the report be noted.

45 ADULT CARE AND HEALTH PDS INFORMATION BRIEFING

The Adult Care and Health PDS Information Briefing comprised 4 reports:

- Minutes from the Health Scrutiny Sub-Committee meeting held on 5th September 2023
- Local Account 2022/23
- Capital Programme Monitoring Q2
- Annual Complaints Report and Local Government and Social Care Ombudsman Letter 2022/23

RESOLVED that the Information Briefing be noted.

46 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**

47 EXEMPT MINUTES OF ADULT CARE AND HEALTH PDS COMMITTEE MEETING HELD ON 5TH SEPTEMBER 2023

RESOLVED that the exempt minutes of the Adult Care and Health PDS Committee meeting held on 5th September 2023 be agreed.

48 PRE-DECISION SCRUTINY OF EXEMPT ADULT CARE AND

HEALTH PORTFOLIO HOLDER REPORTS

**A VARIATION TO THE PRIMARY AND SECONDARY
INTERVENTION SERVICE CONTRACT (PART 2)**

The Committee noted the Part 2 information within the report.

49 CONTRACTS REGISTER (PART 2)

The Committee noted the Part 2 information within the report.

**50 UPDATE: INTEGRATED COMMUNITY EQUIPMENT SERVICE
(PART 2)**

The Committee noted the Part 2 report.

The Meeting ended at 8.51 pm

Chairman

**ADULT CARE AND HEALTH
POLICY DEVELOPMENT AND SCRUTINY COMMITTEE
21st November 2023**

**ORAL QUESTIONS TO THE
PORTFOLIO HOLDER FOR ADULT CARE AND HEALTH**

Oral Question to the Portfolio Holder for Adult Care and Health received from Councillor Jeremy Adams:

1. What will the role of lived experience in The Adult Social Care Strategy 2023 to 2028, and specifically within the offer to deaf and disabled people in Bromley?

Reply:

Members of this committee will be aware that at the last June PDS a paper detailing an Engagement Framework was endorsed by Members alongside an additional and separate paper giving an overview of the Resident Voice Project and Working Group

The Resident Voice Group (RVG) which was established in October 2022 reviews & centralises resident engagement work across adult services. This also supports as an enabler to identify engagement opportunities. We have started to focus on co-production, and further engagement with the voluntary sector is essential for this.

Recent examples include:

- ***We ran an online consultation/survey capturing views for the Adult Social Care Strategy.***
- ***We ran an online consultation/survey and in person engagement on the Carers Plan Engagement.***
- ***We held a 2 day Roadshow event at the Bromley Glades where we directly engaged with over 580 members of the community including those from the voluntary sector; we captured 70+ views on adult safeguarding via a survey, the findings of this shaped our future business plan.***
- ***We ran a face-to-face workshop for those from the DeafPlus community in February 2023, raising awareness of what Adult Safeguarding is, how to report a concern, and the support services available for those experiencing hardship. We took this opportunity to listen to their views and captured feedback via surveys.***
- ***Held a workshop for a church congregation, attended predominantly by older people together with a group of children and their parents. We raised awareness of the available support in the community for vulnerable adults and provided additional support to some attendees with lived experience who had some queries.***
- ***We hold regular comms meetings via the BSAB that includes members from the voluntary sector; all of our comms resources are developed in consultation with this cohort.***

- *Developed the BSAB business plan together with voluntary sector partners.*
- *Have a live [online consultation](#) to capture ongoing feedback from all including those from the voluntary sector.*

What's in the pipeline:

- *Working with voluntary partners (BCWA, etc.) to get the views of those with lived experience to co-produce Domestic Abuse resources.*
- *Meeting with members of the Kent Association for the Blind (KAB) to raise awareness of adult safeguarding, financial abuse, etc. and to capture their views on our resources.*

Supplementary Question:

To what extent will lived experience be part of commissioning?

Reply:

We will be working with service users, the voluntary sector and those with lived experience to develop and co produce services which reflect their priorities but this has to be taken in the context of the financial envelope that we have .

Agenda Item 5

Report No.
CSD24010

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Date: Tuesday 30th January 2024

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

Title: MATTERS OUTSTANDING AND WORK PROGRAMME

Contact Officer: Jo Partridge, Democratic Services Officer
Tel: 020 8461 7694 E-mail: joanne.partridge@bromley.gov.uk

Chief Officer: Director of Corporate Services and Governance

Ward: All Wards

1. Reason for decision/report and options

- 1.1 The Adult Care and Health PDS Committee is asked to review its forward work programme and matters outstanding from previous meetings.
-

2. **RECOMMENDATION**

- 2.1 **The Committee is requested to review the Adult Care and Health PDS Committee forward work programme and matters outstanding from previous meetings, and indicate any changes required.**

Impact on Vulnerable Adults and Children

1. Summary of Impact: None
-

Transformation Policy

1. Policy Status: Not Applicable
 2. Making Bromley Even Better Priority (delete as appropriate): Not Applicable:
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: Not Applicable:
 3. Budget head/performance centre: Democratic Services
 4. Total current budget for this head: £366k
 5. Source of funding: Revenue Budget
-

Personnel

1. Number of staff (current and additional): 6
 2. If from existing staff resources, number of staff hours:
-

Legal

1. Legal Requirement: None:
 2. Call-in: Not Applicable: Non-Executive reports are not subject to call-in
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Property

1. Summary of Property Implications: Not Applicable
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications:
-

Customer Impact

1. Estimated number of users or customers (current and projected): This report is intended primarily for the benefit of Committee Members.
-

Ward Councillor Views

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

3. COMMENTARY

Matters Outstanding from Previous Meetings

- 3.1 The Adult Care and Health PDS Committee's matters outstanding table updates Members on "live" recommendations from previous meetings and is attached at **Appendix 1**.

Work Programme

- 3.2 The Adult Care and Health PDS Committee Work Programme outlines the programme of work for the Committee including areas identified at the beginning of the year, new reports and those referred from other committees, the Portfolio Holder for Adult Care and Health or the Council's Executive.
- 3.3 The Committee is asked at each meeting to consider its Work Programme and ensure that priority issues are being addressed; that there is an appropriate balance between the Committee's key roles of holding the Executive to account, policy development and review, and external scrutiny of local services, including health services; and that the programme is realistic in terms of Member time and Officer support capacity. The proposed Work Programme is attached at **Appendix 2**.
- 3.4 Other reports will be added to the 2023/24 Work Programme as items arise.

Non-Applicable Headings:	Impact on Vulnerable Adults and Children, Transformation/Policy Implications, Financial Implications, Personnel Implications, Legal Implications, Procurement Implications, Property Implications, Carbon Reduction/Social Value Implications, Impact on the Local Economy; Impact on Health and Wellbeing; Customer Impact, Ward Councillor Views
Background Documents: (Access via Contact Officer)	Minutes of previous meetings

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MATTERS OUTSTANDING FROM PREVIOUS MEETINGS

APPENDIX 1

PDS Minute number/title	Committee Request	Update	Completion Date
Minute 43 22 nd November 2022 Work Programme and Matters Outstanding	The possibility of re-establishing the programme of Member visits to be considered in the new year.	A plan to be brought forward in the new year – update to be provided at the next meeting.	In progress
Minute 36 21 st November 2023 Update from the Director of Adult Social Care	Update on the work being undertaken with the Social Care Institute of Excellence (SCIE).	Verbal update to be provided to the meeting on 30 th January 2024.	
Minute 39 21 st November 2023 Tackling Loneliness Strategy Action Plan 2022-2026 Update	List of suitable premises for delivering initiatives to be provided to Members upon request.	Link provided: https://bromley.simplyconnect.uk/activities?keyword=venue%20hire&post_code=Bromley&page=4&limit=20&sort=&type_id%255B%255D=2	Completed
Minute 43 21 st November 2023 Annual Monitoring Report – Dementia Post Diagnosis Support Services	Details of the Dementia Befriending Service to be provided to Members.	Link circulated to Members on 29 th November 2023.	Completed
Minute 50 21 st November 2023 Update: Integrated Community Equipment Service	An update to be provided at the next meeting.	Verbal update to be provided to the meeting on 30 th January 2024.	

Adult Care and Health PDS – Work Programme 2023/24

Health Scrutiny Sub-Committee		30th January 2024
Item		Status
Update from King's College Hospital NHS Foundation Trust		Standing item
GP Access		Standing item
Update from the London Ambulance Service		
Bromley Healthcare Strategy		
SEL ICS/ICB Update		Standing item
Healthwatch Bromley – Patient Experience Report		Standing item
South East London Joint Health Overview & Scrutiny Committee (Verbal Update)		Standing item
Adult Care and Health PDS Committee		30th January 2024
Item		Status
Update from the Director of Adult Social Care		Standing item
Adult Care and Health Portfolio Draft Budget 2024/25		PH item
Contract Monitoring – Extra Care Housing Schemes		PDS item
Adult Social Care Transformation Programme		
Contract Register		<i>Information item</i>
Health Scrutiny Sub-Committee		12th March 2024
Item		Status
Update from King's College Hospital NHS Foundation Trust		Standing item
GP Access		Standing item
SEL ICS/ICB Update		Standing item
Healthwatch Bromley – Patient Experience Report		Standing item
South East London Joint Health Overview & Scrutiny Committee (Verbal Update)		Standing item
Adult Care and Health PDS Committee		12th March 2024
Item		Status
Update from the Director of Adult Social Care		Standing item
Loneliness Action Plan Update		
Budget Monitoring 2023/24 Q3		PH item
Gateway 2 Award - Adult Mental Health Recovery and Rehabilitation Support @ Home Service	Part 1 & 2	Executive item
Older People's Block Beds		Executive item
Permission to commence with the procurement to replenish the Domiciliary Care Patch arrangements		Executive item
Capital Provision for PSTN		

Capital Programme Monitoring Q3		
Contract Register		

Future items:

Adult Care and Health PDS Committee		June 2024
Item		Status
Transport Gateway Report – Transport		Executive item

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Agenda Item 7

Report No.
FSD24007

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: ADULT CARE AND HEALTH POLICY DEVELOPMENT AND SCRUTINY COMMITTEE

Date: Tuesday 30th January 2024

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

Title: ADULT CARE AND HEALTH PORTFOLIO DRAFT BUDGET 2024/25

Contact Officer: John Johnstone, Head of Finance, Adults, Health & Housing
Tel: 020 8461 7006 E-mail: John.Johnstone@bromley.gov.uk

Chief Officer: Director of Finance

Ward: All

1. Reason for report

- 1.1. The prime purpose of this report is to consider the Portfolio Holder's Draft 2024/25 Budget which incorporates future cost pressures, planned mitigation measures and savings from transformation and other budget options which were reported to Executive on 17th January 2024. Members are requested to consider the initial draft budget being 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 2024/25 Council Tax levels.
 - 1.3. There are still outstanding issues and areas of uncertainty remaining, including, for example grant conditions, which could impact on the final revenue budget. Any significant changes will be reported at the meeting and further updates will be included in the 2024/25 Council Tax report to the next meeting of the Executive.
-

2. RECOMMENDATIONS

2.1 The Adult Care and Health PDS Committee is requested to:

- i) Consider the update on the financial forecast for 2024/25 to 2027/28;
- ii) Consider the initial draft 2024/25 budget as a basis for setting the 2024/25 budget; and
- iii) Provide comments on the initial draft 2024/25 budget for the February meeting of the Council's Executive.

Impact on Vulnerable Adults and Children

1. Summary of Impact: None arising directly from this report
-

Corporate Policy

1. Policy Status: Existing Policy
 2. MBEB Priority: Adults and Older People, Managing our resources well
-

Financial

1. Cost of proposal: Not Applicable
 2. Ongoing costs: Recurring Cost
 3. Budget head/performance centre: Adult Care and Health portfolio budgets
 4. Total current budget for this head: £95.0m (draft 2024/25 budget)
 5. Source of funding: Draft revenue budget for 2024/25
-

Personnel

1. Number of staff (current and additional): Full details will be available with the Council's 2024/25 Financial Control Budget to be published in March 2024
 2. If from existing staff resources, number of staff hours: Not Applicable
-

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 Local Government Act 2000; the Local Government Act 2002 and the Accounts and Audit Regulations 2015.
 2. Call-in: Not Applicable
-

Procurement

1. Summary of Procurement Implications: Not Applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): The 2024/25 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: Not Applicable

3. COMMENTARY

3.1. APPROACH TO BUDGETING, FINANCIAL CONTEXT AND ECONOMIC SITUATION WHICH CAN IMPACT ON PUBLIC FINANCES

- 3.1.1. The Draft 2024/25 Budget enables the Council to continue to deliver on its key priorities and the financial forecast enables medium term financial planning. Early decisions should be considered which impact on the medium-term financial plan within the context of meeting 'Making Bromley Even Better' priorities.
- 3.1.2. The Council continues to deliver key services and 'live within its means'. Forward financial planning and financial management is a key strength at Bromley. This report continues to forecast the financial prospects for the next four years and includes the outcome of the Provisional Local Government Finance Settlement 2024/25. It is important to note that some caution is required in considering any projections for 2025/26 to 2027/28 as this depends on the outcome of the Government's next Spending Review as well as the impact of the Fair Funding Review (likely to be from 2026/27, at the earliest).
- 3.1.3. A strong economy with growth increases revenues which supports the Government's ability to reduce public sector debt as the gap between finances raised and spend on public services is reduced. The slowing down of the global economy and many sources of uncertainty had previously resulted in a downgrading of the level of economic growth in the UK economy. It is important to consider the key national issues that could impact on public finances over the next four years. The Covid situation had a dramatic impact on public finances. Not since the second world war has a national emergency affected every business and household in the UK. The economic shock has had no comparisons for over 300 years. As part of the Office for Budget Responsibility report, published with the Autumn Statement, government overall debt rises from 84.9% of Gross Domestic Product (GDP) in 2022/23 and is expected to continue to increase and peak at 93.2% in 2026/27 and fall to 92.8% by 2028/29, maintaining a level not seen since the early 1960s. The next few years remain uncertain economically and fiscally. GDP is expected to be 0.6% in 2023/24 rising to 2% in 2026/27 and 1.9% in 2027/28. These economic factors could impact on the funding available for local government. The Provisional Local Government Finance Settlement 2024/25 provides a one-year settlement only which leaves considerable uncertainties over future years. The Institute for Fiscal Studies (IFS) forecast that the latest plans (Autumn Statement) provides real term cuts for unprotected budgets (mainly local government) of 3.4% for period 2024/25 to 2028/29 – additional funding of £20bn would be required to avoid cuts by 2028/29.
- 3.1.4. Local Government has borne the brunt of austerity and savings compared with other areas of Government expenditure from 2009/10 to 2019/20 (10 years) and had a 'rollover plus' one-year financial settlement for 2020/21, 2021/22 and 2022/23. For 2023/24 and 2024/25, the Council has received a more generous settlement which includes additional funding for social care, including the repurpose of Adult Social Care Reform monies and the new Adult Social Care Grant. However, this needs to be considered in the context of the 'new normal' (post Covid), significant increases in inflation since 2022/23 and the considerable cost pressures across service areas facing local government. The risk of austerity measures for future years, from 2025/26, will be a consideration but this will depend on the need for a sustainable economic recovery. Therefore 'flat' real terms funding for councils may be the best-case scenario from 2025/26. The Government will need to address the impact of the public finances from the Covid situation. Even if funding levels are maintained, the ongoing demographic and other costs pressures are unlikely to be matched by corresponding increases in government funding.
- 3.1.5. The Budget Strategy has to be set within the context of ongoing cost and demographic pressures not being matched by Government or other external funding with potential

Government funding reductions in the medium and longer term. There is an on-going need to transform 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 medium-term budget gap as the gap could increase further.

- 3.1.6. Bromley has the second lowest settlement funding per head of population in 2024/25 for the whole of London, giving us £123 per head of population compared with the average in London of £330 – the highest is £556. Despite this, Bromley has retained the fourth lowest council tax in outer London (other low grant funded authorities tend to have higher council tax levels). Using 2024/25 funding information, if Bromley's received the average grant funding for London, its annual income would increase by £53.7m. If the council tax was the average of the four other low grant funded boroughs, our income would increase by £31.9m. The lower council tax level has been achieved by having a below average cost per head of population in outer London. The Council continues to express concerns with the current and previous governments about the fairness of the funding system and to lobby for a fairer deal for our residents. Despite being a low-cost authority, Bromley has achieved general savings of over £130m since 2011/12 but it becomes more challenging to achieve further savings with a low-cost base.

3.2. SUMMARY OF FINANCIAL FORECAST

- 3.2.1. Details of the financial forecast are provided in the Draft 2024/25 Budget and Update on the Council's Financial Strategy 2024/25 to 2027/28 report to the Executive on 17th January 2024.
- 3.2.2. Even though the draft budget would be broadly balanced next year, the future year's budget gap is projected to increase to £38.7m per annum by 2027/28. Without any action to address the budget gap in future years additional reserves will need to be used with the risk of the budget gap increasing in future years and becoming unsustainable.
- 3.2.3. In the financial forecast, after allowing for inflation, council tax income and other changes there is an unfunded budget gap from 2025/26 partly due to net service growth/cost pressures. This highlights the importance of scrutinising growth and recognition that corresponding savings will need to be found to achieve a statutory balanced budget. It is timely as we all have to consider what level of growth the Council can afford and the need for significant mitigation or alternative transformation options.

3.3. CHANGES SINCE THE 2023/24 BUDGET THAT IMPACT ON THE DRAFT 2024/25 BUDGET AND FINANCIAL FORECAST

- 3.3.1. The 2023/24 Council Tax report reported to Executive in February 2023 identified a significant "budget gap" over the four-year financial planning period. Some key changes are summarised below.
- 3.3.2. The Local Government Finance Settlement 2024/25 includes increases in core funding to reflect inflation (CPI annual increase at Sept '23). The additional social care grant, which was originally planned as indicated by the Local Government Finance Settlement 2023/24, of £2.65m reflects the impact of the Council's ability to raise funding through the Adult Social Care precept – the more that can be raised the lower level of funding provided. Additional new homes bonus of £0.4m is available and the core spending power overall increase of 6.2% assumes council tax and ASC precept increase of 4.99%. The settlement includes a reduction in Services Grant from £1.5m to £0.2m (reduction of £1.3m) which is disappointing. Although the settlement broadly recognises the impact of inflation it does not reflect the scale of cost/growth pressures facing the Council for 2024/25. Uncertainty remains on the level of funding from 2025/26. The forecast assumes that the level of core grant funding will not reduce, in real terms, from 2025/26.

- 3.3.3. This is the sixth one-year settlement in a row for councils, despite requests for multi-year settlement to assist in financial planning and to aid the delivery of financial sustainability.
- 3.3.4. Historically, the main measure of inflation for annual price increases for the Council's contracted out services was Retail Price Index (excluding mortgage interest rates) i.e., RPIX. However, more recent contracts use Consumer Price Index (CPI). The RPIX is normally at least 1% above the Consumer Price Index (CPI) level. The Draft 2024/25 Budget assumes overall price increases, including a cash limit, of 3.5% in 2024/25 reducing to 2.5% in 2025/26 and 2% per annum from 2026/27, which compares with the existing CPI of 3.9% (4.1% for RPIX). Although inflation is expected to reduce further some volatility remains. It is important to note that the rate of 3.5% in 2024/25 is consistent to an approach taken by many other local authorities but it creates a challenge during a period of cost pressures across services - the alternative is more savings to address the increased budget gap.
- 3.3.5. The Draft Adult Care and Health Portfolio 2024/25 budget includes the full year effect of the Phase 3 Transformation Savings combined with new changes, totalling £2,193k in 2024/25. More details of the savings are provided within Appendix 1.
- 3.3.6. There remain significant cost/growth pressures impacting on Adult Care and Health budgets as well as opportunities for the mitigation of costs which have been reflected in the draft 2024/25 Budget and financial forecast which are summarised below with more details in Appendix 1:

	2024/25 £'000	2025/26 £'000	2026/27 £'000	2027/28 £'000
Growth/cost pressures	9,573	11,400	13,227	15,054
Mitigation	Cr 4,989	Cr 2,114	Cr 2,114	Cr 2,114
Net additional costs	4,584	9,286	11,113	12,940

- 3.3.7. It remains essential that there is the ongoing scrutiny and review of growth/cost pressures, which are mainly unfunded beyond 2025/26 with options to help achieve a balanced budget, including any mitigation over the financial forecast period.
- 3.3.8. **DETAILED DRAFT 2024/25 BUDGET**
- 3.3.9. Detailed Draft 2024/25 Budgets are attached in Appendix 1 and will form the basis for the overall final Portfolio/Departmental budget after any further adjustments to deal with service pressures and any other additional spending. Under the budget process previously agreed, these initial detailed budgets are forwarded to PDS committees for scrutiny and comment prior to the next Executive meeting in February.
- 3.3.10. Appendix 1 sets out the draft 2024/25 budget as follows:
- A summary of the Draft 2024/25 Revenue Budget for the Portfolio showing actual 2022/23 expenditure, 2023/24 budget, 2024/25 budget and overall variations in planned spending between 2023/24 and 2024/25;
 - A summary of the main reasons for variations for the Portfolio in planned spending between 2023/24 and 2024/25 together with supporting notes;
 - A high-level subjective summary for the Portfolio showing expenditure on employees, premises etc.

3.4. ADULT SOCIAL CARE REFORM

- 3.4.1. In September 2021, the Government provided plans to reform adult social care in England and £5.4bn (cumulative) was allocated for the period 2022/23 to 2024/25 to fund the reforms.
- 3.4.2. The funding was initially planned to come from the new Health and Social Care Levy, but in September 2022 the Government announced the levy would be cancelled. The then Health Secretary, Thérèse Coffey, however, said that funding for social care would remain unchanged.
- 3.4.3. The Government originally proposed that the adult social care charging reforms would be implemented from October 2023. However, at the Autumn Statement 2022, the Chancellor announced that the reforms would be delayed for two years (until October 2025), with the funding allocated “to allow local authorities to provide more care packages.”
- One of the reforms, The Fair Cost of Care, sought to resolve the issues of self-funders cross subsidising the rate paid by Local Authorities. In preparation for the introduction of this an exercise was completed with care providers to ascertain the ‘Fair Cost of Care’ in order that the Council could work towards paying this over a period of years.
 - £1.4 billion was to be provided to local authorities to support them to increase the rates they pay to providers where necessary (move towards paying a “fair cost of care”).
- 3.4.4. Prior to the 2022 Autumn Statement announcement delaying the charging reforms, the Government had announced the Fair Cost of Care reforms would be implemented in stages from October 2023 to April 2025. The Council has previously raised concerns that the funding for the reforms was insufficient, particularly for the Fair Cost of Care, with Bromley facing a higher funding shortfall compared with many other local authorities.
- 3.4.5. As part of the 2023/24 Local Government Finance Settlement, the funding for Fair Cost of Care and Charging Reforms was ‘repurposed’ to support additional cost pressures on adults and children’s social care which was welcomed by the Council. There remains uncertainty about the future funding for the reforms when implemented in October 2025 and whether the existing ‘repurposed’ funding would need to be diverted to support the delayed reforms. The financial forecast assumes that the ‘repurposed’ funding can be used to support the Council’s revenue budget and will not be required to fund the delayed reforms. This remains a potential financial risk for the Council and creates uncertainty for the future funding of key services. The expectations of providers were, however, raised and costs for care have continued to remain high and are increasing on the back of the exercise carried out to determine the Fair Cost of Care.
- 3.4.6. The Draft 2024/25 Budget includes the ‘repurposed’ Adult Social Care Reform funding (£2.65m in 2024/25) which has been consolidated into the Social Care grant, as well as the second year of the Market Sustainability and Improvement Fund grant (£5.2m in 2024/25).
- 3.4.7. A White Paper on social care reform was published on 1st December 2021 which included, for example, offering more choice, control and independence for care users, information on workforce reform, inspection and quality assurance, integrated housing support and integration with health services. As part of support for wider system reform the £1.8bn over the period 2022/23 to 2024/25 was originally planned to be allocated as follows:
- At least £300m to provide integrated housing
 - At least £150m for technology and digitalisation
 - At least £500m for workforce training and qualifications
 - Up to £25m to support unpaid carers
 - £30m for innovation of support and care
 - At least £5m to help people understand care and support available

- More than £70m to improve the delivery of care and support services
- Use of the balance (around £720m) yet to be determined

3.4.8. Despite much of this now being delayed the Council has continued to seek to maximise the opportunities to utilise technology and digitalisation, has developed a workforce strategy and worked with the voluntary sector to improve the offer to carers.

3.5. INTEGRATION WITH HEALTH

3.5.1. The Council continues to work with the South East London Integrated Care Board to explore opportunities for any further delivery of local integration of health and social care. Integration will help protect social care and provide more effective services to people in the community. There are close interdependencies between health and social care which was recognised by the Government in the creation of the Better Care Fund. Opportunities will be explored including the pooling of resources across the locality if it enables better opportunities for value for money, economies of scale, reduce duplication and streamline processes. Any opportunities for further integration will be considered by the Bromley Local Care Partnership, which is co-chaired by the Leader of the Council.

3.5.2. Advice from Chartered Institute of Public Finance and Accountancy (CIPFA) states that Councils have a duty to their own council taxpayers as well as their clients and need to ensure that their council taxpayers are not, in effect, being asked to underwrite a portion of NHS costs.

3.5.3. The new Integrated Care System (ICS) created from June 2022 provides a new combined South East London ICS. The changes will be monitored closely to identify the risks/opportunities that may arise to meet the 'Making Bromley Even Better Priorities'. The Local Care Partnership maintains oversight of decisions to ensure that they are not made to the detriment of the Bromley population.

3.6. REVIEW OF FEES AND CHARGES

3.6.1. As part of the Transformation Programme, to help partly offset the impact of the financial challenges facing the Council, a comprehensive review of fees and charges was undertaken. The aim was to identify opportunities for cost savings by implementing increased charges, surpassing the annual inflationary adjustments. The review observed that most services conduct regular price evaluation, accommodating inflation adjustments wherever feasible. Chief Officers will continue to review fees and charges for 2025/26 and beyond to identify opportunities to reduce the future years 'budget gap'.

3.7. IDENTIFYING FURTHER SAVINGS/MITIGATION

3.7.1. The scale of savings required in future years are unlikely to be met by efficiency alone – there may need to be a reduction in the scope and level of services. The council will need to continue to review its core priorities and how it works with partners and key stakeholders and the overall provision of services. A significant challenge is to consider discretionary services which, if reduced, could result in higher cost statutory obligations. Therefore, it is important to consider the risk of 'unintended consequence' of reducing discretionary services adversely impacting on the cost of statutory services. The Draft 2024/25 Budget represents the fifth year of savings from the Transformation Programme.

3.8. POSITION BY DEPARTMENT – OTHER KEY ISSUES/RISKS

Adult Social Care

- 3.8.1. The budget proposals represent a realistic position for Adult Social Care which build on the continued success of previous transformation programmes. The new proposals seek to address further areas of potential efficiencies and to address some inequalities in current service delivery. Work on developing these has been carried out with providers of services, both statutory and voluntary and those represented by them.
- 3.8.2. The impact of people being discharged from hospital with higher levels of acuity, requiring more care at higher cost continues to be a pressure. There was a reduction in the monies from health to pay for discharges to clear hospital beds, which has created an additional pressure and will become a risk if this funding is further reduced. Another remaining pressure is with those young people moving through transition into adulthood as the new Moving into Adulthood service is yet to start delivering efficiencies.
- 3.8.3. A further risk lies with the government's delay of some of the Adult Social Care reforms. Work with the provider sector has raised genuine expectations of the Council moving towards the Fair Cost of Care, pushing up care costs.
- 3.8.4. Adult Social Care is committed to moving forward with the increased use of digital technology to make best use of available staff capacity, whilst enabling service users to remain independent.
- 3.8.5. The Directorate continue to prepare for the new Assurance Process with the Care Quality Commission, who will consider as part of the assurance process if appropriate resource is available to meet statutory requirements. As the Director of Adult Social Care, I am content that the available budget for the next financial year is appropriate to do this, within the current governmental requirements, but any additional burdens introduced within the year will require additional funding.

Public Health

- 3.8.6. Recurring cost pressures of annual NHS pay awards and inflation continue to put pressure on the new and existing public health contracts, specifically Sexual Health and 0-19 Services. However, these are being managed through careful budget monitoring and contract management during 23/24. This position is likely to continue unless next year's pay awards and inflation rise beyond current level. In the case of Sexual Health, the agreed new clinical procedures and treatments identified during 23/24 will be incorporated into the London Integrated Sexual Health Tariffs from 24/25. Current forecast suggests that the cost implication could potentially be absorbed by the current Public Health Grant budget. This is feasible as recent online activity indicates the rate of growth has slowed with the possibility of plateauing during the coming year in 24/25.
- 3.8.7. However, the Office of Health Improvement and Disparities (OHID) has prescribed several new and emerging public health initiatives to enhance existing programmes with expectation that local implementation will take place during 24/25. While grant funding is available for service implementation, there will not be any for programme management as it is expected that existing staffing capacity will support these. As Bromley does not have provision for some of these programmes, i.e. Stop Smoking and Weight Management, there will not be any capacity available to implement these requirements. This is further compounded by the retirement of a few key staff members within the Department, however, a couple of them have opted for return to work on reduced hours. This has meant the experience required is retained but additional specific public health programme support will be needed to fulfil future mandated obligations.
- 3.8.8. A medium-term Public Health Grant budget forecast (24/25 to 27/28) suggested that the additional prescribed staffing cost would give rise to an immediate pressure in the first year

of 2024/25 but thereafter this would be fully covered throughout the planning horizon to 2027/28. This forecasted position remains the same under three different financial scenarios from 1% to 0% Public Health Grant Uplift from 25/26 to 27/28.

4. IMPACT ON VULNERABLE ADULTS AND CHILDREN

4.1 The Draft 2024/25 Budget reflects the Council's key priorities which includes, for example, supporting vulnerable adults with children and being ambitious for all our children and young people.

5. POLICY IMPLICATIONS

5.1 The Draft 2024/25 Budget enables the Council to continue to deliver on its 'Making Bromley Even Better' key priorities and the financial forecast enables medium term financial planning allowing for early decisions to be made which impact on the medium-term financial plan. The Council continues to deliver key services and lives within its means.

6. FINANCIAL IMPLICATIONS

6.1 Financial implications are contained within the overall body of the report.

7. PERSONNEL IMPLICATIONS

7.1 Staff, departmental and trade union representatives will be consulted individually and collectively on any adverse staffing implications arising from the Draft 2024/25 Budget. Managers have also been asked to encourage and facilitate staff involvement in budget and service planning.

8. LEGAL IMPLICATIONS

8.1 The adoption of the budget and the setting of the council tax are matters reserved for the Council upon recommendation from the Executive. In coming to decisions in relation to the revenue budget (and the Council Tax), the Council and its officers have various statutory duties. In general terms, the Council is required by the Local Government Finance Act 1992 to make estimates of gross Revenue expenditure and anticipated income, leading to a calculation of a budget requirement and the setting of an overall budget (and Council Tax). The amount of the budget requirement must be sufficient to meet the Council's legal and financial obligations, ensure the proper discharge of its statutory duties, and lead to a balanced budget.

8.2 Schedule 72 to the Localism Act 2011 inserted a new section IVZA in the Local Government Finance 1992 Act which sets out the duty on billing authorities, and precepting authorities to each determine whether their relevant basic amount of council tax for a financial year is excessive. If an authority's relevant basic amount of council tax is excessive, the provisions in relation to the duty to hold a referendum will apply.

8.3 The making of these budget decisions at full Council is a statutory responsibility for all Members. The Council should be satisfied that the proposals put forward are a reasonably prudent use of resources in both the short and long term, and that the interests of both Council Taxpayers and ratepayers on the one hand and the users of Council services on the other are both taken into account. The Council has a number of statutory duties which it must fulfill by law. Although there can be an element of discretion on level of service provision. The Council also discharges a range of discretionary services. The Council is not bound to carry out such activities in the same way as it is for statutory duties, however, it may be bound contractually to do so. A decision to cease or reduce provision of a

discretionary service must be taken in accordance with sound public /administrative law decision making principles. The Council must also comply with the Public Sector Equality Duties in section 149 of the Equality Act 2010. In doing so, the Council must have due regard to elimination of discrimination, harassment and victimisation, advance equality of opportunity and foster good relations with persons who share a protected characteristic.

- 8.4 This report sets the budget for the forthcoming financial year and, in some cases where budgets are recommended to be reduced, further decisions may be required (or have already been taken) to implement the initiative achieving the budget reduction. These decisions will be subject to any applicable consultation requirements and analysis of equalities impacts together with consideration of other specific legal requirements. This will be undertaken as part the decision-making process as required to implement the proposed budget.
- 8.5 Further a significant number of these decisions are by law for the Executive or delegated officers. Such considerations, which will be fully assessed by the decision makers in due course, are therefore not set out in this report. It therefore follows that the outcome of these decisions may lead to further amendments and/or changes to the proposed savings. Members will be aware that decisions on the budget do not amount to detailed decisions on the precise delivery of services, those decisions, in any event, for most services, being by law a matter for the Executive. Decision makers (usually Executive, Portfolio Holders or Chief Officers) are aware and will be reminded of their flexibility for example, around possible budget virements and adjustments and the use of reserves when they consider it appropriate to make alternative decisions, which may not accord with a particular budget line. The overall requirement to balance the budget remains, however.
- 8.6 The Local Government Act 2003 included new requirements to be followed by local authorities, which includes the CIPFA Prudential Code. This includes obligations, which includes ensuring adequacy of future years reserves in making budget decisions and section 25 of that Act requires the Director of Finance to report on the robustness of the estimates made for the purposes of calculating the Council Tax and the adequacy of the reserves. Further details to support these obligations will be reflected in the 2024/25 Council Tax report to be reported to the February meeting of the Executive.

Non-Applicable Sections:	Procurement Implications
Background Documents: (Access via Contact Officer)	Capital Programme Monitoring 2023/24, Executive, 29 th November 2023 Budget Monitoring 2023/24, Executive, 29 th November 2023 Provisional Final Accounts 2022/23, Executive, 5 th July 2023 2023/24 Council Tax, Executive 8 th February 2023

ADULT CARE & HEALTH PORTFOLIO

DRAFT REVENUE BUDGET 2024/25 - SUMMARY

2022/23 Actual	Service Area	2023/24 Budget	Increased costs	Other Changes	2024/25 Draft Budget
£		£	£	£	£
	Adult Social Care				
23,299,363	Assessment and Care Management	22,815,560	1,844,820	183,030	24,843,410
0	Carers	0	3,480	0	3,480
117,972	Direct Services	117,090	40,710	(22,420)	135,380
43,807,379	Learning Disabilities Services	48,075,130	1,842,630	1,743,090	51,660,850
8,649,499	Mental Health Services	8,414,440	302,330	279,000	8,995,770
2,333,397	Quality Assurance & Safeguarding	2,074,980	75,470	627,610	2,778,060
907,032	Placement and Brokerage	979,180	33,360	(319,620)	692,920
79,114,642		82,476,380	4,142,800	2,490,690	89,109,870
	Integrated Commissioning Service				
(19,513)	Better Care Fund	(20,320)	(610,380)	610,380	(20,320)
0	Improved Better Care Fund	0	(0)	(0)	(0)
0	Information & Early Intervention	5,250	122,730	(60,740)	67,240
1,298,942	Integrated Commissioning Service	1,400,420	53,740	(2,390)	1,451,770
1,279,429		1,385,350	(433,910)	547,250	1,498,690
	Public Health				
289,490	Public Health	315,890	67,430	(64,000)	319,320
289,490		315,890	67,430	(64,000)	319,320
80,683,561	TOTAL CONTROLLABLE	84,177,620	3,776,320	2,973,940	90,927,880
421,685	TOTAL NON CONTROLLABLE	558,860	12,490	(16,870)	554,480
4,091,806	TOTAL EXCLUDED RECHARGES	3,494,270	0	0	3,494,270
85,197,052	PORTFOLIO TOTAL	88,230,750	3,788,810	2,957,070	94,976,630

ADULT CARE & HEALTH PORTFOLIO
SUMMARY OF BUDGET VARIATIONS 2024/25

Ref		VARIATION IN 2024/25		ORIGINAL
		£'000	£'000	BUDGET 2023/24 £'000
1	2023/24 BUDGET		88,231	
2	Increased Costs		3,789	
	Full Year Effect of Allocation of Central Contingency			
3	Market Sustainability and Improvement Fund	2,788		2,788
4	Adult Social Care Discharge Fund	Cr 1,084		Cr 1,084
5	Social Care Grant re ASC reforms	Cr 720		Cr 15,265
6	Funding from Contingency for Social Care Grant	1,400	2,384	Cr 15,265
	Movements Between Portfolios/Departments			
7	Transfer of LD Care Management Staff & funding to Children's 0-25 years' service	Cr 144		117
8	Care Placements Team Staff to Childrens Division	Cr 320	Cr 464	320
	Real Changes			
	<i>Savings identified for 2024/25 as part of the 2023/24 Budget process</i>			
9	Develop in-Borough supported housing schemes for Learning Disabilities Services	Cr 174		17,920
10	Shared lives project out of Borough	Cr 8		558
11	Sexual Health	25	Cr 157	3,188
	<i>Other Real Changes</i>			
12	Repurposed ASC Reform Monies (2024/25)		Cr 1,400	Cr 2,880
	<i>Growth</i>			
13	ACM - Placements - 23/24 FYE	4,637		30,223
14	Learning Disabilities - 23/24 FYE	833		46,397
15	Mental Health - 23/24 FYE	529		6,598
16	National Living Wage	1,640		800
17	Fall out of IBCF one off use	400		Cr 400
18	Learning Disabilities Growth	1,534	9,573	46,397
	<i>Mitigation</i>			
19	Preparing for adulthood support	Cr 46		46,397
20	Better Care Fund Inflation	Cr 177		0
21	Improved Better Care Fund Inflation	Cr 51		
22	LA Discharge funding	Cr 1,081		Cr 1,083
23	ICB Discharge Funding	Cr 1,213		0
24	Market Sustainability Improvement Fund	Cr 2,420	Cr 4,988	Cr 3,810
	<i>Transformation Programme Savings</i>			
25	Strategic needs assessment of those with learning disabilities to support commissioning of supported housing and associated services	Cr 250		46,397
26	Extra care housing for older people	Cr 100		14,806
27	Providing a Direct Payment for D2A	Cr 25		956
28	Charging Policy for Adhoc Transport Costs	Cr 10		Cr 4,718
29	Reduce Agency fees by recruiting ASYE and permanent staff	Cr 50		0
30	Digital Transformation in Adult Social Care	Cr 50		7,070
31	Adult Social Care Reform - General Includes models of care and community hubs	Cr 50		7,070
32	Mental Health Housing Support transformation	Cr 50		6,100
33	DOLs reduction in the number of assessments	Cr 14		885
34	Enhanced Domiciliary Care	Cr 369		7,070
35	Ordinary Residents Review	Cr 200		14,806
36	Disabled Facilities Grant (DFG)	Cr 20		7,070
37	Enhanced Reablement	Cr 200		14,806
38	Efficiencies across the Promoting Independence Service	Cr 250		7,070
39	CareLink/ AT Service Transformation.	Cr 203		7,070
40	Utilisation of public health reserve to mitigate against inflation increases	Cr 263		0
41	Utilisation of public health reserve to mitigate against inflation increases - staffing	Cr 89	Cr 2,193	0
42	Variations in Capital Charges		0	
43	Variations in Recharges		218	
44	Variations in Insurances		Cr 17	
45	2024/25 DRAFT BUDGET		94,976	

ADULT CARE & HEALTH PORTFOLIO

Notes on Budget Variations in 2024/25

Ref	Comments
<u>Full Year Effect of Allocation of Central Contingency</u>	
3	<u>Market Sustainability and Improvement Fund (Dr £2,788k)</u> Drawdown of Market Sustainability and Improvement Fund expenditure budget (23/24 level) to Adult Social Care.
4	<u>Adult Social Care Discharge Fund (Cr £1,084k)</u> Drawdown of the Adult Social Care Discharge Fund grant (23/24 level) to Adult Social Care.
5	<u>Social Care Grant for ASC reforms (Cr £720k)</u> Allocation of part of the Adult Social Care Reform grant funding from 23/24 to the Adult Social Care budget.
6	<u>Funding from Contingency for Social Care Grant - (Dr £1,400k)</u> Adjustment from contingency to reflect the final allocation of Social Care Grant for 23/24.
<u>Movements Between Portfolios/Departments</u>	
7	<u>Transfer of LD Care Management Staff & funding to Children's 0-25 years' service (Cr £144k)</u> This is the full year effect of the transfer of Learning Disabilities care management staff and funding for a 0.5 fte to the 0-25 years' service within Childrens Social Care.
8	<u>Care Placements Team Staff to Childrens Division (Cr £320k)</u> This is the full year effect of the transfer of several staff from the Care Placements team to the Children's Division.
<u>Real Changes</u>	
<i>Savings identified for 2024/25 as part of the 2023/24 Budget process</i>	
9	<u>Develop in-Borough supported housing schemes for Learning Disabilities Services (Cr £174k)</u> Development and implementation of the Housing with Care Strategy to address growth pressures.
10	<u>Shared lives project out of Borough (Cr £8k)</u> Continued focus of Shared Lives to place residents in brough and support residents out-of-borough return.
11	<u>Sexual Health (Dr £25k)</u> This is a reduction in the 2023/24 savings of £50k relating to further developing on-line provision and therefore reduce clinic attendance.
<i>Other Real Changes</i>	
12	<u>Adult Social Care Reform Monies (2024/25) (Cr £1,400k)</u> There is an increase in government funding in 2024/25 for Adult Social Care Reforms.

	<i>Growth</i>
13	<u>Assessment & Care Management - Full Year Effect of 2023/24 (Dr £4,637k)</u> The full year effect of the 2023/24 overspend on Assessment & Care Management is £4,637k and this has been funded in the 2024/25 budget.
14	<u>Learning Disabilities - Full Year Effect of 2023/24 (Dr £833k)</u> The full year effect of the 2023/24 overspend on Learning Disabilities services is £833k and this has been funded in the 2024/25 budget.
15	<u>Mental Health - Full Year Effect of 2023/24 (Dr £529k)</u> The full year effect of the 2023/24 overspend on Mental Health services is £529k and this has been funded in the 2024/25 budget.
16	<u>National Living Wage (Dr £1,640k)</u> Provision of £1,640k has been included in the 2024/25 budget to fund the impact of the increase to the National Living Wage.
17	<u>Fall out of one-off IBCF funding (Dr £400k)</u> £400k of one-off underspends on the Improved Better Care Fund (iBCF) was allocated in 2023/24 to part fund growth pressures. This has now been removed from the budget in 2024/25 so there is a fall out of £400k.
18	<u>Learning Disabilities Growth (Dr £1,534k)</u> There are demand-related pressures on the Learning Disabilities budget in 2024/25 arising mainly from transition clients and increased client needs and complexity. This is offset by both mitigation and transformation savings as detailed below.
	<i>Mitigation</i>
19	<u>Preparing for adulthood support (Cr £46k)</u> This saving will be delivered through the 0-25 service who now hold this budget.
20	<u>Better Care Fund Inflation (Cr £177k)</u> Additional inflation from the Better Care Fund above that already allocated in the budget.
21	<u>Improved Better Care Fund Inflation (Cr £51k)</u> Additional inflation from the Improved Better Care Fund above that already allocated in the budget.
22	<u>LA Discharge funding (Cr £1,081k)</u> Increase in the Hospital Discharge funding for Bromley in 2024/25, and use of funding in baseline of Discharge funding to support growth in budget.
23	<u>ICB Discharge Funding (Cr £1,213k)</u> Utilisation of the SEL ICB Discharge funding to support increased demand in adult social care in 2024/25.
24	<u>Market Sustainability Improvement Fund (Cr £2,420k)</u> Increase in the Market Sustainability Improvement Fund funding for Bromley in 2024/25.

<i>Transformation Programme Savings</i>	
25	<u>Strategic needs assessment of those with learning disabilities to support commissioning of supported housing and associated services (Cr £250k)</u> LD commissioning of supported housing including building and expanding current stock.
26	<u>Extra care housing for older people (Cr £100k)</u> Demand and capacity management in the 6 Extra Care Housing schemes
27	<u>Providing a Direct Payment for D2A (Cr £25k)</u> Provide DPs to residents on discharge identified as eligible in place of D2A.
28	<u>Charging Policy for Adhoc Transport Costs (Cr £10k)</u> Reduction in transport costs due to charging users for adhoc journeys.
29	<u>Reduce Agency fees by recruiting ASYE and permanent staff (Cr £50k)</u> Reduction in agency fees due to recruitment of newly qualified social workers and permanent staff.
30	<u>Digital Transformation in Adult Social Care (Cr £50k)</u> Implementation of ASC Digital Transformation Strategy.
31	<u>Adult Social Care Reform - General Includes models of care and community hubs (Cr £50k)</u> Delivery of ASC Transformation Strategy including strategic coproduction project.
32	<u>Mental Health Housing Support transformation (Cr £50k)</u> Savings from the new MH service post procurement and a lower overall number of people in high-cost placements, with individuals “stepping down” to current vacancies.
33	<u>DOLs reduction in the number of assessments (Cr £14k)</u> Introduction of the DOLs Portal, enabling professionals to complete online assessments.
34	<u>Enhanced Domiciliary Care (Cr £369k)</u> Saving based on estimate of long term savings in residential care, less cost of intervention.
35	<u>Ordinary Residents Review (Cr £200k)</u> Review OR list to identify Working Age Adults/Older People whose care and support is currently being paid for by Bromley, however, are the responsibility of another local authority. Re-charge other LA for previous and ongoing costs.
36	<u>Disabled Facilities Grant (Cr £20k)</u> Review care and support to identify where DFG could be used to help residents remain at home and maintain independent living.

37	<u>Enhanced Reablement (Cr £200k)</u>
	Enhanced reablement offer - pathway is part of the prevention offer, reducing reliance on domiciliary care.
38	<u>Efficiencies across the Promoting Independence Service (Cr £250k)</u>
	OT preventive offer/model includes supporting increased number of people in the community to achieve the outcomes that matter to them in their life.
39	<u>CareLink/ AT Service Transformation (Cr £203k)</u>
	Continued delivery of CareLink/AT Service Transformation programme.
40	<u>Utilisation of public health reserve to mitigate against inflation increases (Cr £263k)</u>
	Inflation on Public Health services recharged in to PH from other departments funded from the PH reserve.
41	<u>Utilisation of public health reserve to mitigate against inflation increases - Payroll (Cr £89k)</u>
	Provision for inflationary pay award's for Public Health staff funded from the PH reserve.
42	<u>Variations in Capital Charges (Net £0)</u>
	The variation in capital charges is due to a combination of the following: (i) Revenue Expenditure Funded by Capital Under Statute (REFCUS) – these are schemes in the capital programme that do not add value to the Council's fixed asset base. It is the nature of the capital programme that the projects covered will change from year to year. The amounts shown are for our current best understanding of the relevant schemes for 2024/25. (ii) Government grants – mainly due to variations in credits for capital grants receivable in respect of 2024/25 capital programme schemes. 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.
43	<u>Variations in Recharges (Dr £218k)</u>
	Variations in recharges are offset by corresponding variations elsewhere and have no impact on the overall position. The variations in recharges include £218k for inflation in services that are recharged to Public Health.
44	<u>Variations in Insurance (Cr £17k)</u>
	Insurance recharges to individual portfolios also have changed between years, in some cases significantly, partly due to the changing profile of actual claims in the recent past. Inflation has also had an impact, both on the projected policy costs, and the costs of delivering the service.

ADULT CARE & HEALTH PORTFOLIO

DRAFT REVENUE BUDGET 2024/25 - SUBJECTIVE SUMMARY

Service area	Employees	Premises	Transport	Supplies and Services	Third Party Payments	Transfer Payments	Government Grants	Other Grants Reimbursements and Contributions	Customer and Client Receipts	Controllable Recharges	Net Interest Income	Transfers to/from Earmarked Reserves	Total Controllable
	£	£	£	£	£	£	£	£	£	£			£
Adult Social Care													
Assessment and Care Management	9,241,290	210,830	384,660	4,950,070	53,790,800	6,223,880	Cr 13,048,550	Cr 684,590	Cr 15,352,170	Cr 20,452,810	0	0	25,263,410
Carers	0	0	0	0	0	103,000	0	0	0	Cr 99,520	0	0	3,480
Direct Services	1,850,470	0	82,160	103,490	47,940	0	0	0	Cr 571,480	Cr 1,377,200	0	0	135,380
Learning Disabilities Services	1,305,230	25,600	910,250	33,630	53,779,880	5,799,720	Cr 425,190	Cr 1,534,950	Cr 3,949,420	Cr 4,283,900	0	0	51,660,850
Mental Health Services	128,750	0	15,970	Cr 335,710	10,671,800	223,940	0	Cr 1,090,610	Cr 394,980	Cr 223,390	0	0	8,995,770
Quality Assurance & Safeguarding	1,957,410	1,950	2,930	890,060	6,430	0	0	0	0	Cr 80,720	0	0	2,778,060
Placement and Brokerage	979,870	0	4,470	2,470	0	0	0	0	0	Cr 293,890	0	0	692,920
	15,463,020	238,380	1,400,440	5,644,010	118,296,850	12,350,540	Cr 13,473,740	Cr 3,310,150	Cr 20,268,050	Cr 26,811,430	0	0	89,529,870
Integrated Commissioning Service													
Better Care Fund	0	0	0	0	9,079,455	0	Cr 1,806,000	Cr 29,724,485	0	22,010,710	0	0	Cr 440,320
Improved Better Care Fund	0	0	0	0	190,530	0	Cr 7,730,240	0	0	7,539,710	0	0	0
Information & Early Intervention	0	0	0	0	3,892,180	0	Cr 170,590	Cr 263,300	0	Cr 3,391,050	0	0	67,240
Integrated Commissioning Service	1,483,620	0	3,350	35,350	282,790	0	0	Cr 194,120	Cr 20,700	Cr 138,520	0	0	1,451,770
	1,483,620	0	3,350	35,350	13,444,955	0	Cr 9,706,830	Cr 30,181,905	Cr 20,700	26,020,850	0	0	1,078,690
Public Health	0	0	0	0	0	0	0	0	0	0	0	0	0
Public Health	1,993,890	0	3,100	559,795	9,430,220	0	Cr 16,332,905	Cr 7,560	0	5,283,780	0	Cr 611,000	319,320
	1,993,890	0	3,100	559,795	9,430,220	0	Cr 16,332,905	Cr 7,560	0	5,283,780	0	Cr 611,000	319,320
	18,940,530	238,380	1,406,890	6,239,155	141,172,025	12,350,540	Cr 39,513,475	Cr 33,499,615	Cr 20,288,750	4,493,200	0	Cr 611,000	90,927,880

Service area	Premises Related Expenditure	Insurance Charges	Property Rental Income	Investment Property Income	Capital Charges /Financing	Total Non Controllable	Excluded Recharges	Total Net Budget
	£							£
Adult Social Care								
Assessment and Care Management	164,320	112,540	Cr 116,070	0	31,000	191,790	4,113,180	29,568,380
Carers	0	0	0	0	0	0	0	3,480
Direct Services	0	4,220	0	0	0	4,220	Cr 2,900	136,700
Learning Disabilities Services	138,830	11,240	0	0	125,000	275,070	Cr 2,792,890	49,143,030
Mental Health Services	24,460	0	Cr 29,740	0	45,000	39,720	Cr 1,514,510	7,520,980
Quality Assurance & Safeguarding	0	3,140	0	0	0	3,140	Cr 1,026,470	1,754,730
Placement and Brokerage	0	1,970	0	0	0	1,970	Cr 694,890	0
	327,610	133,110	Cr 145,810	0	201,000	515,910	Cr 1,918,480	88,127,300
Integrated Commissioning Service								
Better Care Fund	0	0	0	0	0	0	20,320	Cr 420,000
Improved Better Care Fund	0	0	0	0	0	0	0	0
Information & Early Intervention	0	0	0	0	0	0	0	67,240
Integrated Commissioning Service	0	2,450	0	0	0	2,450	5,103,350	6,557,570
	0	2,450	0	0	0	2,450	5,123,670	6,204,810
Public Health								
Public Health	0	36,120	0	0	0	36,120	289,080	644,520
	0	36,120	0	0	0	36,120	289,080	644,520
	327,610	171,680	Cr 145,810	0	201,000	554,480	3,494,270	94,976,630

Page 3 of 3

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Agenda Item 8

Report No.
ACH24-005

London Borough of Bromley

PART ONE – PUBLIC

Decision Maker: Adult Care and Health PDS Committee

Date: Tuesday 30th January 2024

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

Title: Adult Social Care Transformation Programme

Contact Officer: Heather Sinclair-Constance, Programme Manager – Adult Social Care Transformation
Tel: 020 8313 4641 E-mail: heather.sinclair-constance@bromley.gov.uk

Chief Officer: Kim Carey, Director of Adult Services

Ward: All

1. REASON FOR REPORT

- 1.1 The Council has developed the Adult Social Care Strategy for the period 2023 to 2028 to take account of developments across the social care market, changing government policy and wider technological, demographic, and economic changes. It considers the key changes of increased service demand and rising costs pressures in relation to supporting vulnerable older residents, carers, and working age adults with a disability and/or long-term health condition.
 - 1.2 This report sets out what the Council plans to do over the next 10-years through its Adult Social Care Transformation programme to develop a more sustainable and efficient future operating model that offers a new way of working, providing service quality improvements and better outcomes for Bromley residents and our workforce, whilst delivering good quality and safe care and support.
 - 1.3 The new strategy, Adult Social Care Digital Transformation Strategy 2024 to 2034 have been developed to enable us to achieve our Making Bromley Even Better ambitions.
-

2. RECOMMENDATION(S)

- 2.1 The Adult Care and Health Policy Development Committee are asked to note the report and comment on the refreshed strategy.

Impact on Vulnerable Adults and Children

1. Summary of Impact: The strategy outlined in this report will support the delivery of the Adult Social Care Strategy and Transforming Bromley 2024-28 objectives.
-

Transformation Policy

1. Policy Status: Existing Policy:
 2. Making Bromley Even Better Priority (delete as appropriate):
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
 - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.
-

Financial

1. Cost of proposal: n/a
 2. Ongoing costs: n/a
 3. Budget head/performance centre: Adult Social Care
 4. Total current budget for this head: £84.4m
 5. Source of funding: Revenue budget
-

Personnel

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

Legal

1. Legal Requirement: Statutory Requirement: Care Act 2014 and Health and Care Act 2022.
 2. Call-in: Not Applicable:
-

Procurement

1. Summary of Procurement Implications: N/A
-

Property

1. Summary of Property Implications: N/A
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications:
-

Impact on the Local Economy

1. Summary of Local Economy Implications:

Impact on Health and Wellbeing

1. Summary of Health and Well Being Implications: The Strategy seeks to help improve, maintain, and protect the health and wellbeing of all who live and work in the borough.
-

Customer Impact

1. Estimated number of users or customers (current and projected): 82,500 over the 10-year period
-

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 Transforming Bromley strategy document is being refreshed as the primary conduit to develop and deliver savings, efficiency and transformation change programmes. It is being reframed to ensure it remains fit for purpose over the next four years, 2024-28.
- 3.2 The Adult Social Care Strategy sets out what the Council plans to do over the next five years to response to demand and cost pressures in the borough, whilst providing good quality and safe care and support to residents, service users and carers. We know that transformational change is required to help us achieve our objectives; our new strategies set out how the department plans to achieve it.
- 3.3 The new Adult Social Care Digital Transformation Strategy 2024 to 2034 considers the improvements in digital capabilities, connectivity, and infrastructure, in relation to the care solutions we offer and deliver for our residents – providing more engagement choice, but also supports efficient ways of working. The strategy has therefore been developed with the following strategic ambitions and principles:
- a) **Inclusive, engaging, easy** - take a resident-centred approach to design and maximise accessibility. Provide easier digital access to council services and encourage and work with people to use it. Take action to improve digital inclusion. Working in co-production with those to help make this a reality.
 - b) **Well-use, used** - support colleagues to make the best use of the tools and technologies available to them, developing high levels of digitally skilled collaboration. Support colleagues to understand the value of and being able to provide robust data and insights to ethically improve effectiveness and efficiency and make the right decisions for and with Bromley residents.
 - c) **Simple, stable, secure** - simplify and modify our digital estate to make it as secure, resilient, and reliable as practical. Ensure residents have the right tools to support and maximise their independence.
 - d) **Ready to partner, willing to share, able to innovate** - adopt the right technologies, systems, processes, culture, and governance to provide a safe and productive environment for wider collaboration and problem-solving.

The principles will underpin our approach to digital transformation in Adult Social Care



Digital first

We will encourage residents to engage through digital channels where appropriate and look to provide assistance to those unable to use digital options. We will always offer different engagement channels and choices for our residents.



Residents at the heart

We will put residents at the centre of decision-making service design and planning. We will work to include the voice of residents and ensure that equality, diversity, and inclusivity considerations to influence and shape our approach.



Safe & secure access & data management

We will use data ethically and deliver safe and secure access to our services based on the principles of transparency and consent.



Collaborative

We work together with our staff, Partners, and residents to coordinate our activities and decision making. We will work closely with our residents to ensure we deliver a sensitive and appropriate approach.



We will work across Council services and the broader local system to provide an integrated approach supporting better Resident experiences and enabling a "Tell Us Once" approach.



Building on strengths & shared responsibility

We will foster a Resident-led approach that enables more Resident choice and control and supports our Workforce and Partners to share accountability for all Care and Support decisions.



Data - led & data smart

We will use data intelligence to better understand individuals and our communities enabling us to be more proactive and preventative in our support.

- 3.4 The strategy was developed in collaboration the Social Care Institute of Excellence (SCIE), officers in Adult Social Care, across the Council, Voluntary, Community and Social Enterprise (VCSE), and local system partners. It introduces a series of interventions and projects that would transform the 'Resident Journey'. The proposed interventions and projects look to introduce a range of digital tools that change the ways in which the Adult Social Care engage and work with residents, carers, and partners.
- 3.5 The complete strategy is included as an appendix to this report.

4. PROCUREMENT AND PROJECT TIMESCALES AND GOVERNANCE ARRANGEMENTS

- 4.1 **Estimated Value of Proposed Action:** Not Applicable.

5. MARKET CONSIDERATIONS / IMPACT ON LOCAL ECONOMY

- 5.1 The Council provides a range of statutory services for adults, and support to people to assist them with living healthy lives, to prepare for ageing well and to support people with disabilities.
- 5.2 Whilst we are moving towards more digital options for people, we will not exclusively be forcing people down the digital route. We want to explore new ways of meeting the needs of and offering support to our residents, including those who are currently well, to those who are on the edge of needing social care, to people who draw on care and those who care for others.
- 5.3 To ensure there is no digital exclusion we will always have a safety net in place for individuals who do not have access to digital tools or technology, have limited digital literacy, have inadequate digital infrastructure, need support because of their protected characteristics or choose not to use smart technology for whatever reason.

6. SOCIAL VALUE, CARBON REDUCTION AND LOCAL / NATIONAL PRIORITIES

- 6.1 It is acknowledged that digital tools and technology can help to improve the quality, value, and choice for those receiving care and support. A blended approach, using technology to enhance care delivered by a skilled workforce to increase choice, control, independence or safety is part of the Government's 10-year vision outlined within [Putting People at the Heart of Care](#) and the [Next steps to put People at the Heart of Care](#) implementation plan for the adult social care sector in England.

7. STAKEHOLDER ENGAGEMENT

7.1 Staff engagement sessions were held between November 2022 and October 2023 to help develop, design and co-produce the independent review, case for change and Digital Strategy lead by Social Care Institute of Excellence (SCIE), develop the Adult Social Care Workforce Strategy and provide updates the progress of the Adult Social Care Transformation Programme. This involved gathering the views and ideas of staff across Adult Services, other Council departments, and the Bromley care system to help shape this future approach.

7.2 In addition, a wide range of historic and recent consultations, co-production and feedback from service users' carers help to inform our approach. However, whilst there has been extensive co-production across professional groups and organisations, we understand and recognise that more formal mechanisms of co-production with residents is vital to making the Adult Social Care Digital Transformation strategy a reality.

We will also share the strategy with Trade Union and Departments Representatives within the Council for awareness and information purposes.

7.3 We will commissioning a Strategic Co-production Partner to support us to develop a co-production framework, which will be procured and reported to the Policy Development and Scrutiny Committee separately.

8. IMPACT ASSESSMENTS (INCLUDING VULNERABLE ADULTS AND CHILDREN) AND CUSTOMER IMPACT

8.1 An Equalities Impact Assessment (EQIA) has been completed to assess the impact of delivering the new way of working to ensure the service remains sustainable for the future, supported by a workforce that continues to deliver a quality service with better outcomes for residents and our staff. The EQIA will be published on the Council's website if the Strategy is approved.

9. TRANSFORMATION/POLICY IMPLICATIONS

9.1 The strategy outlined in this report have been informed by Making Bromley Even Better Priorities 2 and 5.

9.2 They ensure the Council delivers its statutory duties as set out in the Care Act 2014 and Health and Care Act 2022.

9.3 In addition, deliver on People at the Heart of Care – the Adult Social Care Reform, digitalising social care and workforce policy implications.

10. IT AND GDPR CONSIDERATIONS

10.1 A Data Protection Impact Assessment will be completed in partnership with colleagues in the Digital and IT Team. The use of any new technology solutions to support implementation of the reforms will include the standard wording and expectations upon staff, partners, and providers in relation to IT and GDPR.

11. STRATEGIC PROPERTY CONSIDERATIONS

11.1 There are no strategic property considerations arising from this report. Any strategic property implications arising from the implementation of the various actions contained within both strategy will be reported to the Policy Development and Scrutiny Committee separately.

12. PROCUREMENT CONSIDERATIONS

12.1 There are no procurement considerations arising from this report. New procurement will form a key part of both strategy will be reported to the Policy Development and Scrutiny Committee separately.

13. FINANCIAL CONSIDERATIONS

13.1 There are no direct financial implications arising from the contents of this report.

14. PERSONNEL CONSIDERATIONS

14.1 There are no personnel considerations arising from this report. Any personal implications arising from the implementation of the various actions contained within both strategy will be reported to the Policy Development and Scrutiny Committee separately.

15. LEGAL CONSIDERATIONS

15.1 The strategy outlines how the Council aims to meet statutory obligations in relation to Adult Social Care as set out under the Care Act 2014 and Health and Care Act 2022. There are no further legal implications arising directly from this report.

16. IMPACT ON HEALTH AND WELLBING

16.1 The Strategy seeks to help improve, maintain, and protect the health and wellbeing of all who live and work in the borough.

17. WARD COUNCILLOR VIEWS

17.1 There are no Ward Councillor views needed for this report. Any Ward Councillor implications arising from the implementation of the various actions contained within the strategy will be reported to the relevant Ward Councillor and Policy Development and Scrutiny Committee separately.

Non-Applicable Headings:	7. PROCUREMENT AND PROJECT TIMESCALES AND GOVERNANCE ARRANGEMENTS 11. STRATEGIC PROPERTY CONSIDERATIONS 12. PROCUREMENT CONSIDERATIONS 14. PERSONNEL CONSIDERATIONS 16. WARD COUNCILLOR VIEWS
Background Documents: (Access via Contact Officer)	Adult Social Care Reform Report Social Care Institute of Excellence Gateway Officer Report

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London Borough of Bromley

Adult Social Care - Digital Strategy

Page 53



January 2024



Purpose and background of this document

This document outlines the Adult Social Care Digital Strategy for the London Borough of Bromley (LBB).

The London Borough of Bromley (LBB) is in the process of transforming the delivery of Adult Social Care (ASC) and have established a bold new vision. Working digitally is a key part of this vision.

The ASC Digital Strategy demonstrates progress towards our Corporate Vision and Strategy **'Making Bromley Even Better'**. As part of this journey there is an expectation that digital tools and techniques can be deployed throughout the resident's care and support journeys. Not only does this provide more engagement choices, but it also supports more efficient ways of working.

Our 10-year corporate strategy outlines a clear model for ASC provision to ensure residents receive the right care, in the right place and at the right time.

We have worked in collaboration with officers in the ASC service, the broader Council and local system partners to define a series of interventions and projects that would transform the Resident Journey.

The proposed interventions and projects look to introduce a range of digital tools that change the ways in which the ASC engage and work with residents, carers and partners.

Whilst there has been co-production across professional groups and organisations, we understand and recognise that more formal mechanisms of co-production with residents is vital to making the strategy a reality.

This document outlines the case for change that underpin the strategy, the vision, principles, ideas, benefits all through the lens of the resident and their experiences

Vision

Our overall vision for Bromley is presented in our corporate strategy Making Bromley Even Better 2021-2031.

We want our borough to be:

‘A fantastic place to live and work, where everyone can lead healthy, safe and independent lives’

There are five ambitions for the next stage of our journey.

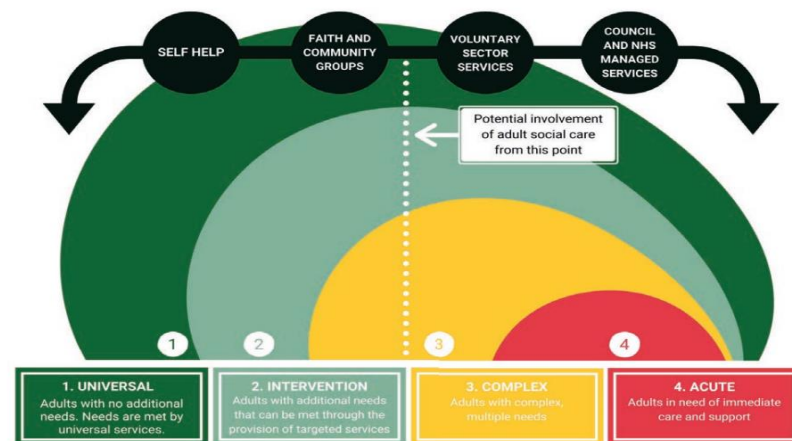
The key for Adult Social Care is:

“For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices”

To manage our resources well, providing value for money, and efficient and effective services for Bromley’s residents”

Our ambitions will be delivered jointly by Bromley and partner agencies. We believe firmly that strong partnerships across local public services, our voluntary and community sectors, faith and community groups and business are key to delivering our plans.”

We recognise therefore for these ambitions to be realised; digital must be integrated into our delivery.



Source: Bromley ASC Continuum of Care Model, London Borough of Bromley Corporate Strategy 2021 - 2031

We see digital as having the potential to enable and empower communities and residents to live their best and most independent lives possible. We will achieve this through a skilled workforce, a constant focus on resident needs and a willingness to adopt new technologies.

Ambitions

We want people in Bromley to live in the place they call home with the people and things that they love, in communities where people look out for one another, doing things that matter to them.

The Digital Strategy supports a much more joined up approach with residents and partners, that will deliver better outcomes for those who need our support. We believe the Digital Strategy will ensure we work with people in a personalised and upstream way, ensuring we can focus on prevention, promoting independence and extending choice and control.

1. Inclusive, engaging, easy.

Take a resident-centred approach to design and maximise accessibility. Provide easier digital access to council services and encourage and work with people to use it. Take action to improve digital inclusion. Working in co-production with those to help make this a reality.

2. Well-used, used well.

Support colleagues to make the best use of the tools and technologies available to them, developing high levels of digitally skilled collaboration. Support colleagues to understand the value of and being able to provide robust data and insights to ethically improve effectiveness and efficiency and make the right decisions for and with Bromley residents.

3. Simple, stable, secure.

Simplify and modify our digital estate to make it as secure, resilient, and reliable as practical. Ensure residents have the right tools to support and maximise their independence.

4. Ready to partner, willing to share, able to innovate.

Adopt the right technologies, systems, processes, culture, and governance to provide a safe and productive environment for wider collaboration and problem-solving.

Why do we need to change and why now?

Infotech and biotech technology capabilities are increasing at a furious rate. Working digitally has become central to the way we communicate, work, purchase goods and services, build relationships and networks.

Working and engaging digitally is an increasingly important element of the care solutions we offer and deliver for our residents – remote working, video meetings, data and information sharing – are just a few examples.

We are all becoming more digitally skilled and are increasingly ready to embrace new digital ways of working.

As we move to the next “new normal” there is an opportunity to rethink and re-imagine how we work.

Improvements in digital capabilities, connectivity and infrastructure will bring new opportunities.

The time is right to embrace digital technology at the heart of our strategies to improve and modernise the way we work.

Given growth pressures it is vital that ASC service finds a new lower cost “operating model” and better ways of working. This will be essential for the service to remain sustainable in the future.

We believe this Digital Strategy delivers a more sustainable and efficient future operating model. It offers a new way of working, providing service quality improvements and better outcomes for residents and the workforce.

The Digital Revolution



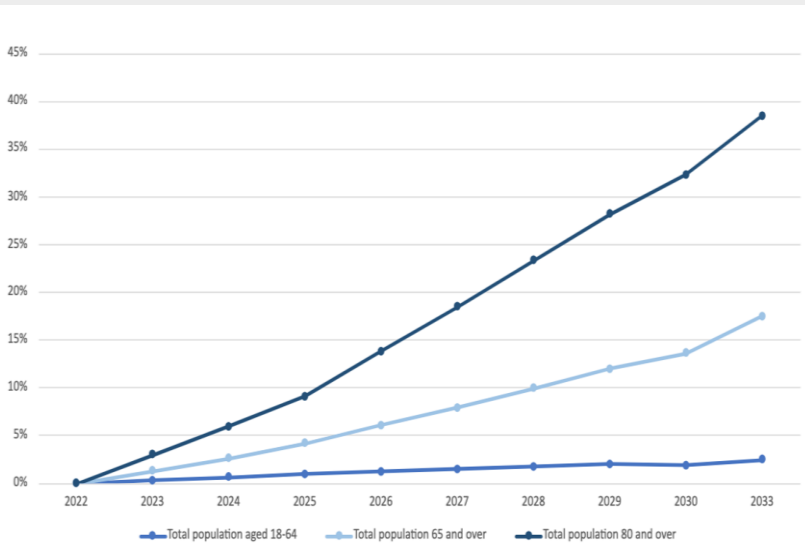
Why do we need to change and why now?

Bromley Council, like many other local authorities across the UK, is experiencing significant cost pressures over the short, medium and long term.

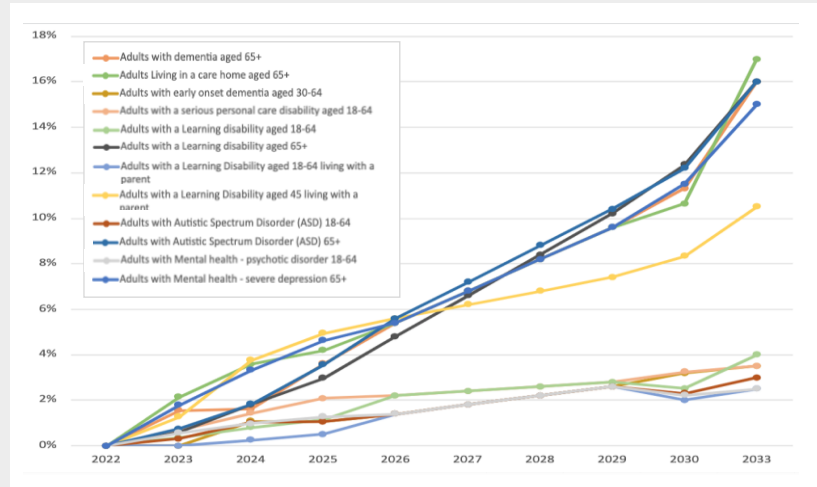
This is largely due to expected population increases and transitions over the next 10 years.

The graphs below summarise the main population trends in Bromley over the next 10 years. The graphs demonstrate the expected rapid increase in the elderly population, especially in the 80 and over age group.

% Population growth by age



% Population growth by group



Digital approaches are providing new and exciting opportunities to support people and enable more choice and control. Digital approaches are already having a transformation effect in different parts of health-care.

This strategy sets out some of the key projects that have been co-created and we believe should be embraced to help create a more effective and sustainable ASC service in the future.

Strategic Principles of Bromley's ASC Digital Approach

The principles will underpin our approach to digital transformation in ASC

Digital first

We will encourage residents to engage through digital channels where appropriate and look to provide assistance to those unable to use digital options. We will always offer different engagement channels and choices for our residents.

One view

We will work across Council services and the broader local system to provide an integrated approach supporting better Resident experiences and enabling a "Tell Us Once" approach.

Residents at the heart

We will put residents at the centre of decision making, service design and planning. We will work to include the voice of residents and ensure that equality, diversity and inclusivity considerations to influence and shape our approach.

Building on strengths & shared responsibility

We will foster a Resident-led approach that enables more Resident choice and control and supports our Workforce and Partners to share accountability for all Care and Support decisions.

Data - led & data smart

We will use data intelligence to better understand individuals and our communities enabling us to be more proactive and preventative in our support.

Safe & secure access & data management

We will use data ethically and deliver safe and secure access to our services based on the principles of transparency and consent.

Collaborative

We work together with our staff, Partners and residents to coordinate our activities and decision making. We will work closely with our residents to ensure we deliver a sensitive and appropriate approach.

Preparing for change – the key foundations & building blocks



Digital Exclusion

We recognise that we work with vulnerable and often elderly populations who would not always have access to digital infrastructure (digital exclusion) and/or do not have the skills or wish to engage through digital channels.

A number of individuals attending workshops and participating in the development of the strategy have raised this as a significant concern.

We believe that digital channels offer more choice (and potential control) for individuals engaging with care and should be offered as an “option” rather than as a single channel.

However, analysis does suggest that digital channels are increasingly being used by elderly and vulnerable populations and the national “Blue Badge” portal and London “Freedom Pass” platform already have high online application rates.

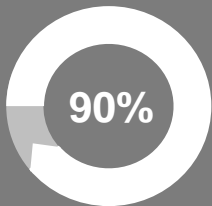
The ONS now estimate that over 90% of individuals in London have internet access and regularly use the internet. We predict that the next generation of Care users will increasingly expect to manage their engagement with ASC through digital channels.

We are developing supporting policies and strategies that provide clarity on how digital channels will operate alongside existing channels to ensure safe and fair engagement arrangements.

Many councils across England have developed “assisted digital” services to support individuals who wish to access services through these channels and/or gain digital skills. There are a range of other London Boroughs that have developed these services and there are a variety of these strategies that can be located through simple internet searches. We will need to agree what arrangements they wish to put into place to support individuals to receive “assisted digital” support.

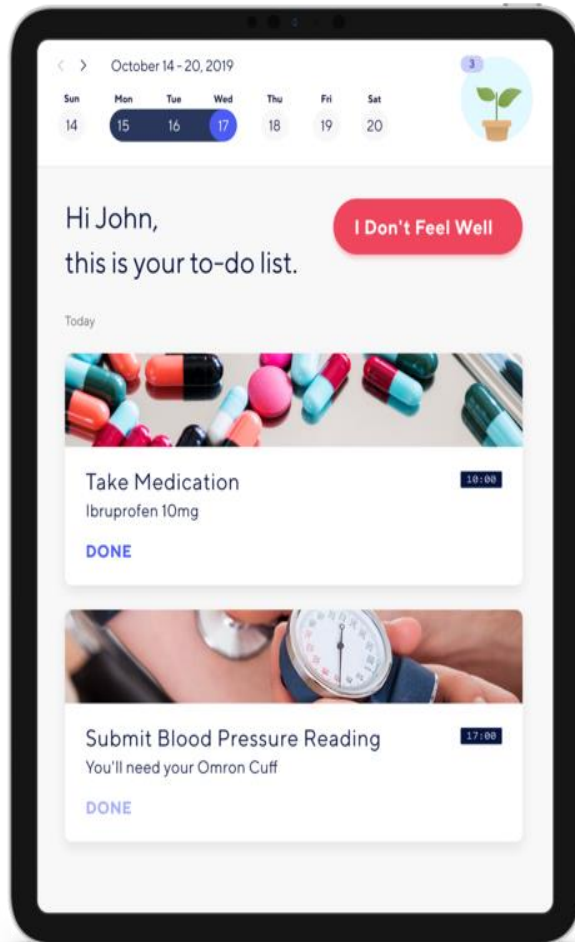
Many of the projects and initiatives contained within this strategy will require good digital connectivity to function and perform effectively. Whilst Bromley enjoys comparatively high levels of Super-Fast broadband (98.6%) it lags the London average for Full-Fibre (42.7% v 52.55%) (Source: Connected London).

Our current Borough data suggests that connectivity maybe a challenge for certain technologies and for certain areas in the Borough and requires further due diligence.



90%
of individuals in London
have internet access

What is Digitally Enabled Care?



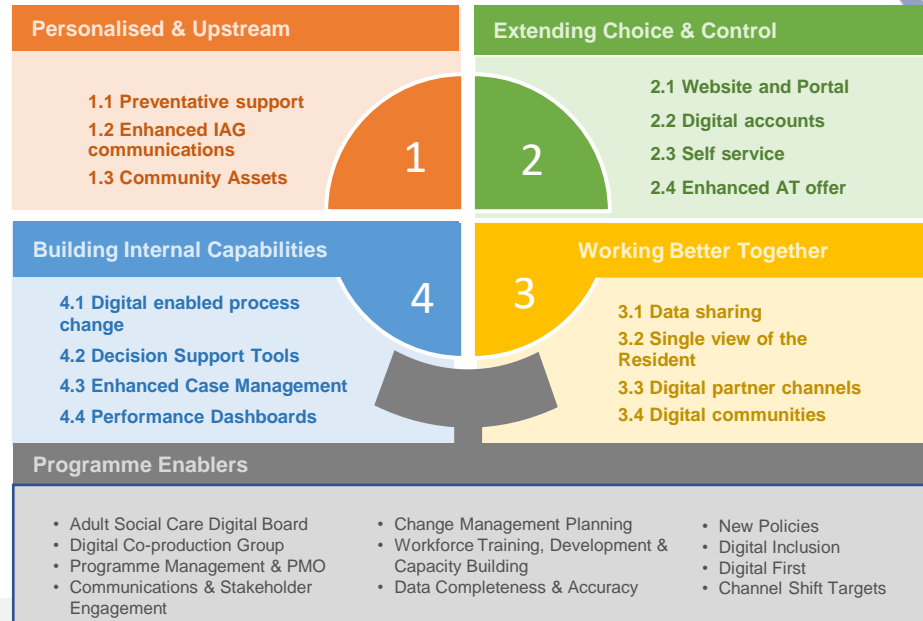
- ➔ **Self-Service** – internet via mobile, voice, video and other devices to access information and guidance, find services, screen for assessment needs
- ➔ **AI/ Automation Tools** – integrates and automates processes for faster, low cost transactions
- ➔ **Wellbeing apps** – to promote self-help such as exercise/activity (Fitbit/Apple), mental health/wellbeing, weight loss
- ➔ **Home Sensors** – to support independence using tracking and sensor devices for doors, cupboards, toilet, early dementia support and care worker tracking
- ➔ **Health monitors/wearables** – health and care self management tools for ECG, sleep, respiration, oxygen pulse rate, body and skin temperature, posture, motion and activity
- ➔ **Smart home tech** - lights, heating, Alexa/Google, alarms,
- ➔ **Contact Apps** - (with family, friends, professionals) FLO, WhatsApp, video/text messaging, Care Apps, Marketplace, Community Hubs, Rally round, Jointly, etc.
- ➔ **Data** - analysis of data from all of the above will enable a greater understanding of an individual's current wellbeing but also historical norms thus alerting to any change in patterns
- ➔ **Connectivity** – access to good broadband, 4G, 5G and public or other Wi-Fi, home security

Our priority areas

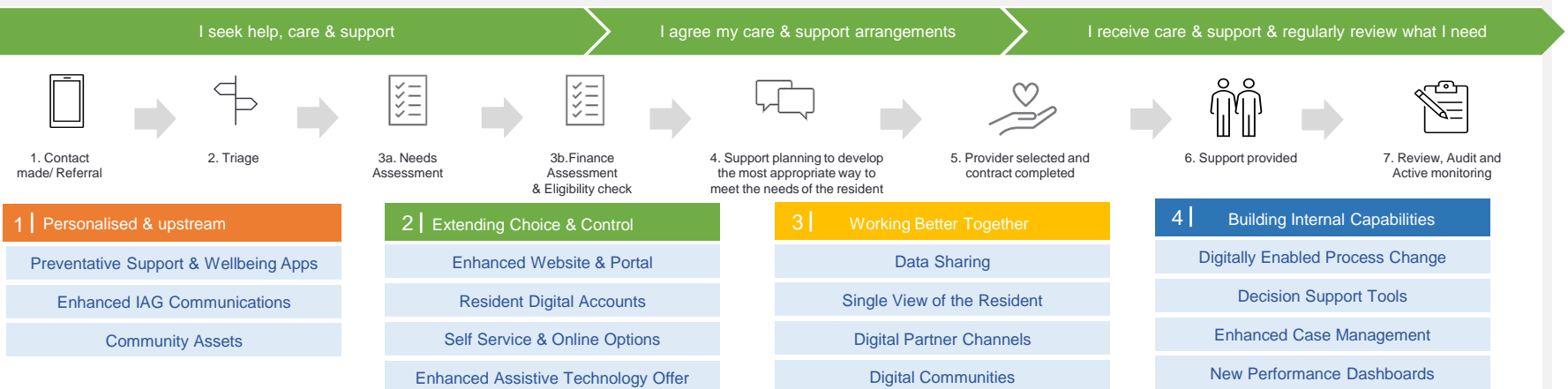
The Strategy follows the resident pathway and maps out the key areas where care can be digital enabled, enhanced or supported.

There are four key workstreams that will support the delivery of key new ideas and projects contained within this strategy, the fifth workstream pulls together enabling policies, plans and support arrangements that “wrap around”, and support the key delivery projects within the strategy.

The projects relating to each theme (1,2,3,4) are summarised in the diagram below and shows where they sit on the resident journey



Digital Strategy – Key Projects



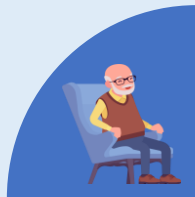
Benefits

The Benefits

We believe that these interventions and projects will bring a range of important benefits...

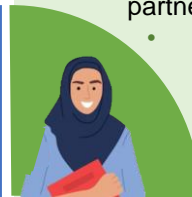
Benefits to Residents and Carers...

- enhanced, personalised approach supported by more efficient service delivery;
- more choice and control and the ability to use digital tools and channels and where this suits people's needs and preferences;
- earlier help and support to maintain independence and to prevent escalation of needs;
- better access to community activities, networks and services;
- care information, advice and guidance that is easier to access and understand; and
- more opportunities to feedback, share views and shape service delivery.



Benefits to the ASC Workforce...

- the potential for greater workforce empowerment and job satisfaction;
- the opportunity to spend more time with people with care needs and to support them earlier in their journeys;
- the ability to prioritise efforts and manage resources more effectively;
- to opportunity to work more holistically with people with a shared cross-system 'single view' of their needs;
 - enhanced ways of communicating and working with local system partners;
 - a better understanding of & to access community assets;
 - digital support tools to enhance professional decision-making; and
 - an opportunity to hear the residents voice and feedback.



Benefits to the ASC Service and Council...

- contributing to the long-term financial sustainability of the Council;
- becoming a "pathfinder" for the use of digital tools and techniques in LBB and building confidence in new ways of working;
- building workforce skills and capacity;
- enhancing local system working and partnering; and
- building digital assets and infrastructure that can be reused and deployed by other services.



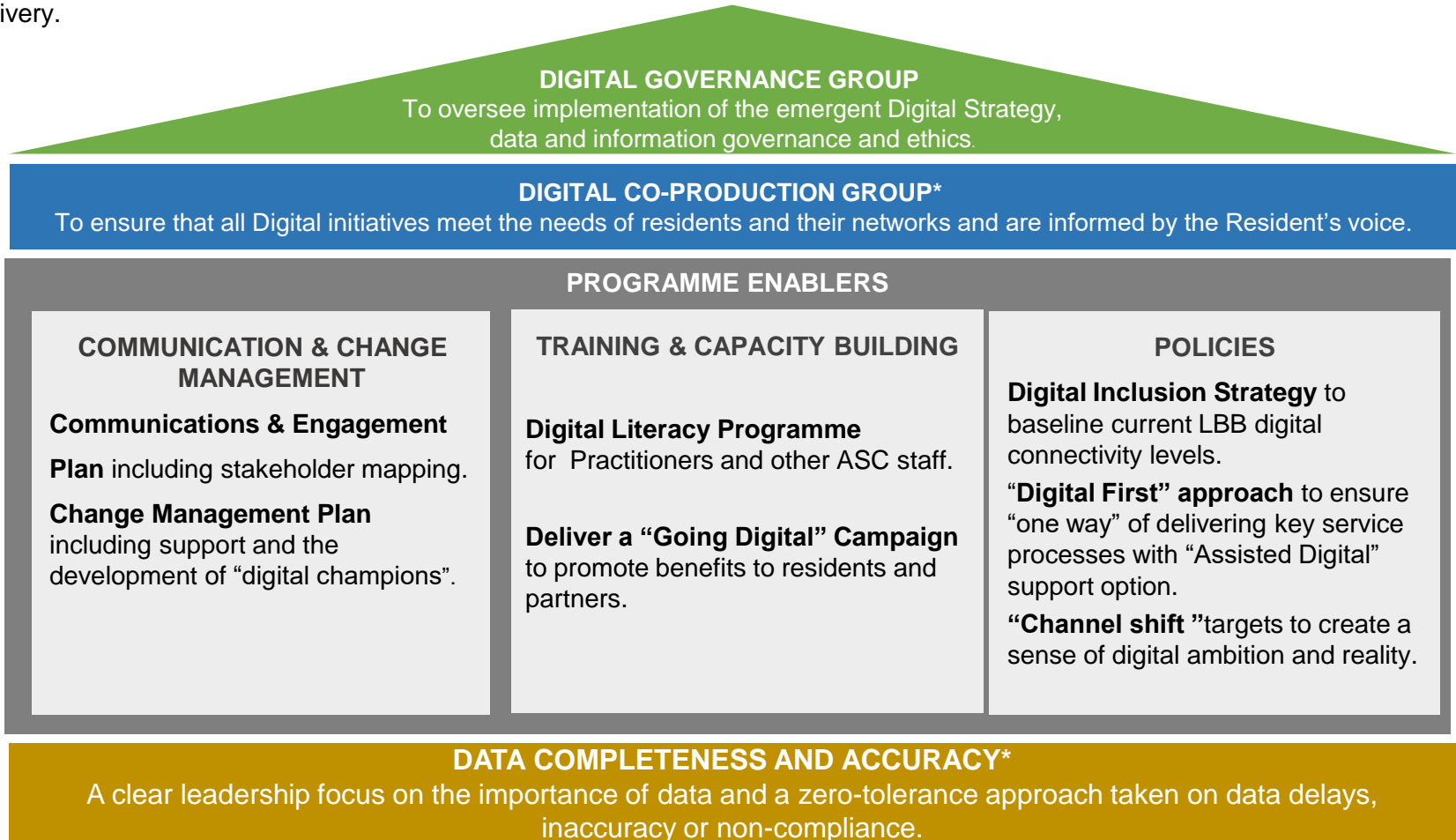
Benefits to the Local System and Partners...

- the ability to take a more holistic view of people and their needs;
 - improved communication channels;
- the development of standardised approaches and models;
- earlier interventions, prevention of crises and reductions in hospital admissions; and
- reduced need for GP visits and 911 calls.



Preparing for change

- Delivering this Strategy requires careful governance, project management and coordination, co-production, communications, training and policy development.
- We have outlined a series of actions we need to take to prepare, structure and enable the process of change.
- These actions will be vital to underpin the delivery of programme benefits and outcomes, they are essential to success of the Strategy delivery.



*Each stage will need to have co-production and data completeness and accuracy built into and underpinning them.

Appendix 1: The projects underpinning the strategy

The Digital Projects

The following section outlines the “big ideas” that have been developed and explored during this project. These form the basis of the Digital Strategy and the Digital Transformation Programme.

These ideas are clustered around 4 key themes...



Personalised and Upstream

These are range of targeted and personalised preventative and information-based interventions and projects to support individuals to remain independent and connected to the communities in which they live...

- **Preventative Support** - a series of digitally based early and self-help packages and/or Wellbeing Apps targeted at those on the “cusp” of Care and Support – individuals thought to be most likely to make requests for Care and Support over the next 3 years - directing them towards “community support” networks and preventative Care packages with the aim of avoiding and/or delaying entry into the ASC service.
- **Enhanced IAG communications** – a series of prompts, notifications, links sent to residents (through the channels of their choice – text, email, portals - and provided throughout their Care and Support journey providing the ability to monitor, track and understand their progress of their Care and Support.
- **Community Assets** - development of a “community led” care asset database usable across the system and for resident’s to enable better mapping, review and development of Community and VSE networks to encouraging better connection and integration with care providers and us.



Extending Choice and Control

These are a range of interventions and projects that enable residents to engage with ASC through digital channels...

- **Website and Portal** - redesign of the ASC website and portal to improve the ability of residents to navigate and find information and self-help advice and guidance (including e-Brokerage and personal budget and quick financial assessment calculators) to support care planning.
- **Digital Accounts** – which provide a full suite of information about a resident’s care and support current arrangements (including key documents, practitioner contacts, personal budgets, care history, review dates etc.) – a “one stop shop” for all relevant information as well as providing the ability to interact with the ASC service including bookings and service requests etc.
- **Self Service** - the ability to self-serve on-line throughout their care and support journey including all assessment (Care Act and Financial) and review activities coupled with the ability to direct and control their care and support journey’s.
- **Enhanced AT offer** – by seeking to ensure that every assessment and care and support decision is digitally enhanced with an ambitious series of digital investments and a new AT delivery model. Initially targeting individuals high-cost care packages and those new into the care system where assistive technology could be part of their care solutions.

The Digital Projects



Working Better Together

These are a series of initiatives and projects which seek to utilise a range of digital tools and techniques to enable more joined up and better partnership working....

- **Data sharing** - creating Data Governance and Information sharing protocols to enable the sharing of data and information about residents between partners.
- **Single view of the Resident** - utilising data more effectively to support a more joined up way of working between Council directorates, Health, VCSE and other system partners to create a “single view” of resident needs.
- **Digital Partner Channels** – introducing standard forms and common digital channels to enhance the efficiency of communications and interactions between partners – for example, for referrals, assessments, triage, hospital discharges etc.
- **Digital Communities** – the development of a range of specific digital communities (for example, carers, transitions) to collaborate and manage risks and, where appropriate, self-manage/regulate to secure benefits.



Building Internal Capabilities

There are several initiatives and projects to enhance ASC processes, workforce productivity and performance....

- **Digitally enabled Process change** - to enable a more resident led, holistic assessment, planning and review process enabled by multi-disciplinary approach with reduced “hand-offs” and “tell us once” approach.
- **Decision Support Tools** - Automated Decision Support tools to support determinations of eligible needs, calculation of personal budgets and development of Care and Support Plans.
- **Enhanced Case Management** – enhancements on improvements to the operation, effectiveness and accessibility of core systems and capabilities including Liquidlogic and Controc.
- **Performance Dashboards** - enhanced real time performance dashboards to support the enhancement of work allocation, strength-based practice, the impact of care and the delivery of better outcomes.

Appendix 2 Bromley's Benefits in "I" and "We" statements

Benefits of Delivering the Digital Transformation Programme (DTP)

We have developed several “I” statements that reflect what the DTP should mean for residents...

“ I was asked for my feedback all the way through my care journey – I believe that ASC care about, and act upon my feedback. ”

“ I have technology support that helps me manage my care. It makes me feel safe and keeps me connected with my family, friends and carers. ”

“ I am aware of the community activities and events where I can meet people like me and get some of the support and help, I need. ”

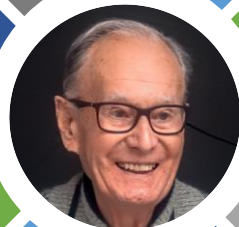
“ I only have to tell my story once and everyone who supports my care seems to know about my changing circumstances and offer me new ideas and solutions. ”

“ I can use new digital channels to work with ASC if I want to – it provides me and those who support me with more choice about how I plan my care arrangements. ”

“ I feel ASC are helping me to achieve my goals and giving me early help and support as my needs change and helping me to maintain my independence. ”

“ I always feel in touch with the ASC and I can always easily and quickly find out about my care history and the next steps in my care journey at a time that suits me best. ”

“ I find the Council website and other information sources easy to discover, navigate and understand. ”



Benefits of Delivering the Digital Transformation Programme (DTP)

We have developed several “we” statements that reflect what the DTP should mean for the Workforce....

“ We get really good real time **feedback on our performance and impact** – we can really see where we make a difference. It makes us feel good. ”

“ We have the data and information about our residents that helps us **predict needs** before they come to the front door. ”

“ We use technology in smart ways to help us to **prioritise and improve** the care and support we provide. ”

“ We have a great, up to date knowledge of the **community activities and assets** that can support residents with their care needs. ”



“ We connect communities together using digital channels that makes it easier to hear **Resident Voice**, views and priorities. ”

“ We have a **shared ‘single view’** of those we care for across all our local partners and have common digital forms and processes that mean we can work together efficiently. ”

“ We have digital tools and techniques that helps us to **work more efficiently and effectively** with residents and make better, more informed decisions. ”

| Appendix 3- Building blocks for change

Preparing for change – the key foundations and building blocks

Our Roadmap includes the key tasks in the next stages of programme delivery and include...



Governance

Reviewing Programme Governance arrangements in line with the recommendations in this strategy.



IT Requirements

Developing the “design” and IT requirements of each Digital project (including “deeper dives” for priority projects).



Skills audit

Programme skills review and audit – where do we need to “procure” additional support and capacity to deliver the programme.



Comms plan

Establishing the arrangements to support the development of a communications and stakeholder engagement plan.



Co-production analysis

Establishing co-production arrangements to test and shape the design of the new Digital Strategy Plans and Proposals.



Digital Strategy

Developing, updating and documenting the Digital Strategy for the Service.



Funding

Funding discussions with partners (including exploration of available grant support for the programme).



Change management

Establishing change management support arrangements and plan.



Programme Structure

Designing and developing the programme structures to support Programme delivery (including the PMO to support the Programme and Strategy progress and track benefits etc.).



Programme Plan

Design and development of the Programme Plan (timeline, prioritisation of tasks and “sprint” model).



Financial Model

Review and revisit of the financial model to support the programme (including investment, benefit and support requirements).



Training plan

Development of workforce training and capacity building plan.



Policies

Development of enabling policies to support programme delivery including...

- ✓ Digital Exclusion Policies and Strategy
- ✓ Digital “first and channel shift” targets
- ✓ Data accuracy standards and strategy

Agenda Item 9

Report No.
ACH24-002

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Adult Care & Health PDS Committee

Date: Tuesday 30th January 2024

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

Title: **CONTRACT MONITORING REPORT - EXTRA CARE HOUSING SCHEMES**

Contact Officer: Jamie Currie, Commissioning Officer
Tel: 020 8461 7427 E-mail: jamie.currie@bromley.gov.uk

Chief Officer: Kim Carey, Director of Adult Social Care Services

Ward: Borough wide

1. Reason for decision/report and options

- 1.1** Creative Support and Mears Extra Care Ltd provide care and support services into the six Extra Care Housing (ECH) schemes within Bromley. Creative Support are responsible for Apsley Court, Sutherland Court and Regency Court. Mears manage Norton Court, Crown Meadow Court and Durham House. This annual service review is being presented in line with LBB Contract Procedure Rules and provides an analysis of provider performance during the current contract term.
- 1.2** This ECH contract commenced on the 1st of August 2017 and was originally scheduled to terminate on the 31st of July 2022. A formal 2+2 year extension option was available (up to 31st July 2026). Approval was given for the contract to be extended for two years from 1st August 2022 to 31st July 2024.
- 1.3** The annual value of the Creative Support contract is £2.12m, with a whole life contract value of £12.7m (2017-2024).
- 1.4** The annual value of the Mears contract is £1.75m, with a whole life contract value of £12.6m (2017-2024)
-

2. **RECOMMENDATION(S)**

2.1 The Portfolio Holder is requested to:

- i)** Note the information contained within the report in relation to the provider performance of these two contracts, and that both providers are consistently meeting the Council's standards under the contract.
- ii)** Note that the Creative Support and Mears are to be reviewed again in 12 months to provide an update on performance and progress made.

Impact on Vulnerable Adults and Children

1. Summary of Impact: To ensure the continued provision of Housing with Care services for older people living in Bromley.
-

Transformation Policy

1. Policy Status: Existing Policy
 2. Making Bromley Even Better Priority (*delete as appropriate*):
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence, and making choices.
 - (3) For people to make their homes in Bromley and for business, enterprise and the third sector to prosper.
 - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.
-

Financial

1. Cost of proposal: Not Applicable:
 2. Ongoing costs: £3.87m per annum
 3. Budget head/performance centre: R82450 – R82455
 4. Total current budget for this head: £4,216k
 5. Source of funding: Existing ASC Revenue Budgets
-

Personnel

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

Legal

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

Procurement

1. Summary of Procurement Implications: N/A
-

Property

1. Summary of Property Implications: N/A
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications: N/A
-

Impact on the Local Economy

1. Summary of Local Economy Implications:
-

Impact on Health and Wellbeing

1. Summary of Health and Wellbeing Implications:
-

Customer Impact

1. Estimated number of users or customers (*current and projected*): A maximum of 271 at any one time

Ward Councillor Views

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

3. COMMENTARY

- 3.1 Creative Support and Mears Extra Care Ltd provide care and support services into six Extra Care Housing (ECH) schemes within Bromley. The two providers each being responsible for three schemes. This annual service review is being presented in line with the Council's Contract Procedure Rules and provides an analysis of both Creative Support and Mears' performance during the current contract term.
- 3.2 Extra Care Housing is the term used for properties which incorporate self-contained flats with the necessary design features and support services to enable independent living. ECH residents rarely require significant 1:1 care or complex medical supervision but they may be at the stage where living without access to 24-hour support is no longer sustainable. While frail and infirm older people are the most common resident group for these schemes, there has been a gradual progression to extend extra care to adults with disabilities as well as younger people with dementia.
- 3.3 Care providers in the schemes are registered with the Care Quality Commission (CQC) and provide personal care to residents when required. The housing landlord owns the building and is responsible for its upkeep, they also manage the tenancy arrangements of the service users and receive rent and service charges for housing and meal provision. All ECH schemes operate in this way with the provision of personal care separated from the housing function; this is a key difference from the way care homes operate and means that a service user can have a change of care provider without having to move from their home.
- 3.4 A typical Bromley ECH development consist of between 50 and 120 flats and contain the following features:
- Purpose-built, accessible building design that promotes independent living and can provide additional support to people as they age.
 - Fully self-contained properties where occupants have their own front doors and tenancies or leases which give them security of tenure and the right to control who enters their home
 - Office for use by staff serving the scheme
 - Some communal spaces and facilities that enable resident activity sessions
 - Access to care and support services 24 hours a day
 - Community alarms and other assistive technologies
 - Safety and security often built into the design with fob or person-controlled entry.
- 3.5 To be eligible for Extra Care Services, clients must:
- be an adult aged 55 or over (in some circumstances younger adults may be referred);
 - be living in Bromley;
 - have been assessed as requiring one of more of the Services in accordance with the Care Act 2014 (or any other policies and guidance adopted by the Council) and;
 - have been referred to the Provider with relevant and appropriate information from the authorised Care Plan and expected outcomes for the Service User.
- 3.6 Nominations are made to ECH schemes following assessment by a care manager on the basis of needs and in accordance with the eligibility criteria set out in the care provider contract. Cases are presented to the Adult Practice Review Group (PRG) for approval. This is to ensure;
- A consistent approach has been applied when evaluating the vulnerable adult's needs,
 - Appropriate ways of meeting their assessed eligible needs have been considered to ensure their safety and wellbeing,

- All possible care options or alternatives for supporting people to live independently as long as possible at home/or in the community are fully explored using the Strength Based Model of Assessing.

If ECH or community-based support options have not already been explored, the PRG will reject any recommendations for residential care

3.7 The ECH model is a more affordable way of providing care to people who have particular needs. In registered care homes, the housing and living costs are part of the overall fee but in ECH schemes, these elements may be funded via welfare benefits. ECH is increasingly being considered as an alternative to care homes, with councils seeking to commission schemes that incorporate a high degree of care and support.

3.8 The Council has six ECH schemes as detailed below:

LBB commissioned ECH Schemes	Crown Meadow Court	Norton Court	Durham House	Regency Court	Sutherland Court	Apsley Court
Location	Brosse Way Bromley	Hayne Rd Beckenham	Durham Ave. Shortlands	Mackintosh St., Bromley	Thesiger Rd, Penge	Wellington Rd, St Mary Cray
Housing provider	Hanover	Housing 21	Clarion	Hanover	Hanover	A2D
Care provider	Mears	Mears	Mears	Creative Support	Creative Support	Creative Support
No of units	60	45	30	60	50	26
Step down units	3	5	4			4

3.9 Creative Support is one of the largest national not-for-profit providers of prevention and care services in England. They deliver services across the UK for 60 different Local Authorities. Creative Support successfully bid for the ECH contract incorporating Apsley Court, Sutherland Court and Regency Court. This contract commenced on the 1st of August 2017. Prior to the contract going out for tender, the council previously operated the Apsley Court scheme.

3.10 Mears Extra Care Ltd currently provides care and support services to 21 extra care schemes across the country and have over a decade of experience providing services in these types of settings. Mears successfully bid for the ECH contract incorporating Crown Meadow Court, Norton Court and Durham House. This contract commenced on the 1st of August 2017. Mears were already providing care and support for the residents of Crown Meadow Court prior to the contract going out for tender, the Durham House and Norton Court schemes were previously operated by the Council.

Service Profile / Data Analysis / Specification

3.11 Within the three ECH schemes, Creative Support and Mears provide personal care and support to service users over 55 years of age with various age related needs. As part of the contracts, the providers are also responsible for the development and delivery of activity programmes that must be suitable for all residents.

Key Performance Indicators (KPI's) form a key part of performance monitoring and are submitted on a four weekly basis. Contract management meetings are held quarterly and the KPI's are used as a basis for monitoring performance and highlighting areas that may require improvement. The KPI's refer to quantitative activity that is carried out by the provider and is regularly evaluated by the contract manager.

KPI measures include:

- % of contracted staff covering shifts

- % of agency staff covering shifts
- % of staff on sick leave
- % compliance with training requirements
- Average number of activity sessions per week (over the period)

The KPI's helped to identify some areas requiring improvement during the infancy of the contract and were used by Creative Support and Mears, along with associated action plans, to improve their performance. Both providers are now consistently meeting the targets set out in the contract specification, as well as the % targets within the KPIs Performance over the past twelve months has been on a par with the previous year. We have seen continued improvements on the activities front, with objectives actually being exceeded at some of our schemes.

3.12 The ECH schemes are subject to inspection by the Care Quality Commission (CQC). The schemes achieved the following ratings from their most recent inspections:

- Apsley Court – Rated GOOD (Last report published on 24 August 2021)
- Regency Court – Rated GOOD (Last report published on 2 November 2021)
- Sutherland Court – Rated GOOD (Last report published on 2 May 2019)
- Crown Meadow Court – Rated GOOD (Last report published on 3 September 2022)
- Durham House and Norton Court – Rated GOOD (Last report published on 27 July 2022)

3.13 The Council's Quality & Provider Relations Team monitors all of the ECH schemes using the Quality Assessment Framework (QAF). This monitors all aspects of performance and is aligned with the CQC inspection so that providers have early notice of any concerns that would be picked up during a CQC inspection. The QAF reports provide Creative Support, Mears and the LBB contract manager with feedback and are an agenda item at quarterly contract management meetings.

3.14 If any areas for improvement are identified during the QAF inspection, action plans will be drawn up with the provider and improvements monitored via repeat inspections. Both Creative Support and Mears have proven to be proactive in their response to findings in the QAF inspections, and the Contract Compliance Team have no current significant concerns in relation to any of the six Extra Care schemes. The Contract Compliance Team also undertakes checks with service users to ensure their satisfaction and quality of care. Feedback is shared with the provider to drive potential areas for improvement, as well as to highlight what is working well.

3.15 The most recent QAFs for each of the schemes were completed on;

Apsley Court – December 2022

Regency Court – December 2022

Sutherland Court – December 2022

Crown Meadow Court – June 2023

Durham House – April 2023

Norton Court – April 2023

Continuous Improvement and Value for Money

- 3.16 Our Extra Care Housing KPIs were revised three years into the contract following close consultation with both Creative Support and Mears. These KPIs provide a wealth of information that is useful in driving improved performance. The Provider Dashboard includes dedicated areas for compliments and complaints, staffing levels, training information and attendance at activities that build into a quarterly progress report. The quarterly progress report is utilised in conjunction with any action plan to ensure that performance continues to improve through the life of the contract.
- 3.17 Areas of significant importance to extra care residents include social interaction and the flexibility of care provision. Our ECH care providers have engaged with local businesses and the wider community to help develop and expand the range of activities available to residents. The level of activities and tenants' participation is reviewed at contract management meetings. Discussions have taken place to open a selection of activities up to Bromley residents living outside of extra care, and thus further increase social interaction.
- 3.18 Creative Support and Mears undertake care tasks based on need and an assessed care plan, they do have a level of flexibility available to them via a tolerance process. The ECH Operations Team regularly reviews this and conversations are held with service users to ensure they are happy with the way their care is being delivered. The feedback from this is taken into account when considering service user satisfaction and the quality of care.
- 3.19 There are now step down units at four of our six Extra Care schemes. These flats are a vital resource for both hospital discharges, as well as clients in the community in need of short term housing with care provision. Most recently, Crown Meadow Court has seen three flats be utilised for step down purposes with a focus on hospital discharges, as well as the use of Assistive Technology. This resource will be of particular importance as part of winter planning. Intelligence from Assistive Technology usage is of significant benefit when it comes to Housing with Care strategy and future commissioning plans.

Opportunities for further progress

- 3.20 Our care providers are happy to continue engagement with wider LBB projects. Examples of where this has worked well previously include Tackling Loneliness and Day Opportunities. Mears and Creative also both undertake ongoing work when it comes to improving and refining the activities on offer for scheme tenants. Regular residents' meetings provide opportunity for engagement, feedback on what is working well, and any changes the residents would like to see. With the step-down flats at Crown Meadow Court still in their infancy, the next year will be important in terms of data gathering to help inform any improvements to the hospital discharges. Mears and Creative Support staff will be a crucial part of that process.

4. SOCIAL VALUE, CARBON REDUCTION AND LOCAL / NATIONAL PRIORITIES

- 4.1 Extra care schemes actively encourage the wider community to get involved in activities and be a part of the community. The Creative Support Extra Care Schemes are available for use by external providers and non-residents. This is facilitated following a safe and well managed process which aligns with the needs and requirements of existing residents. One example of this are the day opportunities on offer for people with a diagnosed Learning Disability. Additional Day Opportunities for older people have also been explored at one of the Mears schemes.
- 4.2 Both Mears and Creative have been involved with Tackling Loneliness in Bromley. LBB's Principal Loneliness Champion has been to visit Crown Meadow Court and her input was well received by residents and staff. The shared information is being taken forward by Mears and Creative to ensure residents can benefit from any existing resources available within the borough. The Extra Care Schemes have also been part of a Christmas Card and Pen Pal project under the Tackling Loneliness umbrella.

5. STAKEHOLDER ENGAGEMENT / USER SATISFACTION

5.1 Creative Support's most recent customer satisfaction survey results, published in August 2022, are as follows:

Apsley Court

100% of residents were satisfied with the quality of the care and support services provided by Creative Support.

Regency Court

100% of residents were satisfied with the quality of the care and support services provided by Creative Support.

Sutherland Court

100% of residents were satisfied with the quality of the care and support services provided by Creative Support.

Service User Feedback

- *"I am comforted knowing that mum is receiving a high standard of care and has her own flat"*
- *"Office staff are always on hand to offer advice and reassurance"*
- *"Staff help me get to appointments and assist me with my meals"*

5.2 Mears' most recent customer satisfaction survey results, published in March 2023, are as follows:

Crown Meadow Court

100% of residents were satisfied with the quality of the care and support services provided by Mears. 46% rated the care as outstanding. (46% 10/10, 10% 9/10, 27% 8/10, 10% 7/10, 2% 6/10, 5% 5/10)

Durham House

100% of residents were satisfied with the quality of the care and support services provided by Mears. 53% rated the care as outstanding. (53% 10/10, 12% 9/10, 35% 8/10)

Norton Court

100% of residents were satisfied with the quality of the care and support services provided by Mears. 63% rated the care as outstanding. (63% 10/10, 24% 9/10, 13% 8/10)

Service User Feedback

- *"It is a joy to be with people that are happy with what they do. It reflects on the residents and makes us happy"*
- *"Carers are very approachable, respectful and I am treated as an individual"*
- *"I do my best to be independent and the carers appreciate this but will help if needed"*

5.3 LBB and Creative Support have an excellent working relationship which has been built over the duration of the contract thus far. Although our care providers are feeling the effects of the cost-of-living crisis and related financial pressures, Commissioning were still able to negotiate a cost saving against the agreed uplift rate for this financial year. This demonstrates the importance and benefit of contract and relationship management between the borough and our Extra Care providers. The ECH Operations Team are also of the opinion that the relationship between care management staff and Creative Support is in a good place.

5.4 Feedback on Creative Support obtained from the Operations Team;

- *“Creative staff at Regency Court are always courteous and helpful”*
- *“Scheme managers are knowledgeable and able to engage with residents”*
- *“Incidents and issues are regularly shared with the ECH Operations Team”*

5.5 Mears’ Regional Director has commented that our regular monitoring meetings and clear lines of communication with operational staff is particularly effective to the smooth running of the service. Scheme managers feel that relationships have greatly improved over time and this has led to a more open dialogue where concerns are raised before they become an issue. Colleagues in the care management teams have provided positive feedback on the service provided by Mears. Regular feedback from care management contributes to the monitoring of this service and the ECH Operations manager has been fully consulted during this review process.

5.6 Feedback on Mears obtained from the Operations Team;

- *“The managers give regular updates on client issues”*
- *“Residents at Norton Court are often complimentary about care and support”*
- *“Response times are impressive”*
- *“Mears staff are professional and usually very helpful in collaborative working”*
- *“Management and staff are professional and friendly”*

6. PROCUREMENT AND CONTRACT ISSUES

6.1 . A final extension option is available for the Extra Care Housing contracts with Mears and Creative Support. This would be for a period of two years, commencing 1 August 2024 and expiring 31 July 2026. It is intended for this option to be taken, with a Gateway report in progress under Chief Officer delegated authority.

7. TRANSFORMATION/POLICY IMPLICATIONS

7.1 Bromley’s Extra Care Housing Service is delivered in accordance with the Care Act 2014. It delivers on the Council’s vision to support people in Bromley to live an independent, healthy, and happy life for as long as possible.

8. IT AND GDPR CONSIDERATIONS

N/A

9. STRATEGIC PROPERTY CONSIDERATIONS

9.1 All the properties utilised under these contracts are owned by external Registered Social Landlords. The Council has sole nomination rights into all these properties.

10. PROCUREMENT CONSIDERATIONS

10.1 In line with 23.2 of the Council’s Contract Procedure Rules, an annual report must be submitted to the Portfolio Holder for all contracts with a value higher than £500k.

11. FINANCIAL CONSIDERATIONS

11.1 The actual and estimated costs of the current contracts are detailed in the table below. Actual costs are likely to vary as a result of individual clients needs, as well as future levels of inflation/national living wage increases.

	Mears	Creative	Total
	£'000	£'000	£'000
<u>Core contract (including approved two-year extension)</u>			
2017/18 (8 months)	1,232	1,061	2,293
2018/19	1,859	1,672	3,531
2019/20	1,881	1,694	3,575
2020/21	1,763	1,640	3,403
2021/22	1,832	1,874	3,706
2022/23	1,699	1,897	3,596
2023/24 (est)	1,759	2,127	3,886
2024/25 (4 months) (est)	586	709	1,295
	12,612	12,674	25,286

11.2 The overall budgets for the contract, voids and support payments to Housing Associations, and client income against actuals to date are set out in the table below:

	Budget			Actual				Variation
	Contract £'000	Income £'000	Net £'000	Contract £'000	HA voids / support £'000	Income £'000	Net £'000	Net £'000
2018/19	3,670	-975	2,695	3,531	138	-959	2,710	15
2019/20	3,744	-994	2,750	3,575	29	-896	2,708	-42
2020/21	3,967	-994	2,973	3,403	122	-717	2,808	-165
2021/22	4,167	-1,004	3,163	3,706	135	-684	3,157	-6
2022/23	4,328	-1,045	3,283	3,596	133	-855	2,873	-410

11.3 At present, an overall underspend of £70k is projected for 2023/24. This is due to an underspend on the contract costs of £458k, as the number of hours are at the minimum level due to the high number of voids, which is substantially offset by a shortfall in client income (£277k) and void payments of £112k.

12. PERSONNEL CONSIDERATIONS

N/A

13. LEGAL CONSIDERATIONS

N/A

Non-Applicable Headings:	[List any of headings 4 to 15 that do not apply.]
Background Documents: (Access via Contact Officer)	[List any documents used in preparation of this report - Title of document and date]

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

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