

# Adults & Communities – Q1 2015/16

## 1. SUMMARY

### 1.1 DELIVERY UNIT DASHBOARD

Financial	
Projected year-end revenue budget variance	Capital actual variance
3,234	936

	Performance	Commissioning Intentions
Green rated	35% (7)	100% (5)
Green Amber rated	10% (2)	0% (0)
Red Amber rated	5% (1)	0% (0)
Red rated	50% (10)	0% (0)

### 1.2 TOP ACHIEVEMENTS AND ACTIONS

#### Top Achievements

Go-live of enhanced social care direct model is already seeing more effective screening at the front door of adult social care – in a typical week have investigated, actioned and closed over 50% of referrals, cases and safeguarding referrals. In the week commencing 22 June, 71 of 102 incoming cases (69.6%) were closed at the front door.

Significant reduction in the number of working age adults in residential placements, from 316 to 302.

Launch of new information, advice and advocacy contract now delivered by Barnet CAB.

Key Challenges	Actions required
1. Recovering the budget position.	Budget recovery plan is being put in place by the delivery unit working together with corporate finance and the Commissioning Director.
2. Demand for deprivation of liberty safeguarding assessments (DoLS) continues to rise – June saw the largest volume for a single month in Barnet.	Recruitment continues to build in-house capacity.  Approach to meeting demand will need to be reviewed if peak is sustained.
3. CQC inspections continue to highlight a large number of provider concerns in the residential care market in Barnet.	The care quality team is working proactively with around 30 homes to support their improvement and safeguard of any vulnerable residents. This includes significant multi-agency working with health, the CCG, other local authorities and the CQC.

### 1.3 SUMMARY OF THE DELIVERY UNIT'S PERFORMANCE

There are significant challenges in delivering within budget in 15/16 and there is a significant overspend forecast at the end of the first quarter – entirely arising from the care purchasing budgets. The underlying demand pressures carried forward from 14/15 have been sustained along with further pressures. A significant proportion of 15/16 MTFS savings will not be delivered this year (£3m). In addition, the financial impact of the Care Act is still unknown and there are growing pressures from the health system.

Phase 1 reforms for policy and practice arising from the Care Act have been successfully implemented and the impact of these continues to be monitored. The Care Act project moved to a second phase with a timetable of activity agreed by Adults and Safeguarding Committee. However, this is being closed down due to the government announcement of the delay of the 2016 reforms to 2020.

Results from the corporate staff survey (conducted in June 2015) show significant improvement in engagement of staff. This is against a backdrop of significant change within the Delivery Unit, and budgetary constraints. Recruitment and other remedial actions have started to make an impact to reduce agency usage and ensure greater stability in the workforce – this position should improve further in the second quarter.

## 2. Performance

### 2.1 How the Delivery Unit is performing against its performance indicators

	RAG ratings				Improving or the same	Worsening	No. of indicators expected to report this quarter
	Green	Green Amber	Red Amber	Red			
Strategic	5	1	1	5	12	8	12
Critical	2	1	0	5	6	7	8
<b>Overall</b>	<b>35% (7)</b>	<b>10% (2)</b>	<b>5% (1)</b>	<b>50% (10)</b>	<b>90% (18)</b>	<b>75% (15)</b>	<b>20</b>

### 2.2a Performance Indicators that did not meet their target

Appendix A outlines the indicators which have met their target.

Ref	Indicator description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Type of indicator	Period Covered <i>Timeframe data has been measured</i>	Previous Result <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	Direction of Travel <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
AC/S3	Percentage of adults with learning disabilities who live in stable accommodation	Strategic	Apr-June 2015	58.10%	60.00%	422/709	59.52%	0.8%	Improving	
AC/S4	Percentage of adults with learning disabilities in paid employment	Strategic	Apr-June 2015	9.4%	10.6%	66/709	9.3%	12.2%	Worsening	

<b>Ref</b>	<b>Indicator description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Type of indicator</b>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Result</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>Direction of Travel</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
AC/S5	Percentage of adults with mental health needs in paid employment	Strategic	Apr-June 2015	5.7%	7.0%	37/767	4.8%	31.1%	Worsening	
AC/S11	Percentage of older people remaining at home 91 days after discharge	Strategic	Oct 2014 – March 2015	71.9%	81.5%	316/428	73.8%	9.4%	Improving	
AC/S16	Proportion of people with a Direct Payment	Strategic	Apr-June 2015	29.4%	40.0%	1048/2674	39.2%	2.0%	Improving	
AC/S17	Number of new telecare packages installed	Strategic	Apr-June 2015	216	270	119/	119	55.9%	Worsening	
AC/S18	Percentage of Service users receiving on-going services with telecare	Strategic	Apr-June 2015	13.0%	17.0%	475/3979	11.9%	29.8%	Worsening	
AC/C2	Proportion of people using social care who receive self-directed support	Critical	Apr-June 2015	98.4%	100.0%	2657/2674	99.4%	0.6%	Improving	
AC/C7	Percentage of DoLS applications completed within statutory	Critical	Apr-June 2015	100.0%	100.0%	42/231	18.2%	81.8%	Worsening	

<b>Ref</b>	<b>Indicator description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Type of indicator</b>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Result</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>Direction of Travel</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
	timeframes									
AC/C10	Percentage of clients receiving an on-going package of care reviewed (end of year projection)	Critical	Apr-June 2015	69.8%	75.0%	N/A	66.3%	11.6%	Worsening	
AC/C11	Average Number of days from contact to end of assessment	Critical	Apr-June 2015	17.6	18.0	22.59/	22.6	25.5%	Worsening	
AC/C12	Number of delayed transfers of care from hospital, per 100,000 population (aged 18+)	Critical	June 2014 - May 2015	5.89	5.81	N/A	5.84	.05%	Improving	
AC/C13	Number of delayed transfers of care from hospital,, and those which are attributable to adult social care per 100,000 population (aged 18+)	Critical	June 2014 - May 2015	2.5	2.5	N/A	2.8	12.0%	Worsening	

## 2.2b Comments and proposed interventions for indicators which did not meet target

Ref No. and Indicator Description	Comments and Proposed Intervention
<p>AC/S3 Percentage of adults with learning disabilities who live in stable accommodation</p>	<p>A review programme is underway to support people who can step down from education and residential care settings to move into supported living, private rented sector or shared lives settings.</p>
<p>AC/S4 Percentage of adults with learning disabilities in paid employment</p>	<p>Commissioners are reviewing services to support individuals with learning disabilities to achieve and maintain employment.</p>
<p>AC/S5 Percentage of adults with mental health needs in paid employment</p>	<p>Mental Health commissioners are bringing together people with lived experience and professionals across the sector as part of developing a new model for supporting people of working age with mental health.</p>
<p>AC/S11 Percentage of older people remaining at home 91 days after discharge</p>	<p>Work is underway to better understand the causes of this outturn. It relies on health data and there are concerns that Barnet under-reports in comparison to other local authorities. The increase of discharge of increasingly frail older adults through intermediate care and enablement may also be a major cause of the current performance level.</p>
<p>AC/S16 Proportion of people with a Direct Payment</p>	<p>Barnet a strong record for having high numbers of people who receive their care through a Direct Payment and is one of the top performers nationally. Following reviews towards the end of 2014/15 a number of individuals on low level DPs ceased receiving a payment and continued review activity may reduce numbers. However, a significant number of new DPs are being agreed to counter this and all cases coming to panel need to demonstrate that a DP option has been considered.</p>
<p>AC/S17 Number of new telecare packages installed</p>	<p>We have mapped new and shortened business pathways so that telecare can be installed more quickly with the new Provider. This is monitored on a monthly basis with the Provider. All panel applications evidence whether someone has been offered telecare Further training with staff about the range of options available is planned Prevention internet page will be available in Q2 which will include information about telecare, and stories from people who use the services.</p>
<p>AC/S18 Percentage of Service users receiving on-going services with telecare</p>	<p>See Above</p>
<p>AC/C2 Proportion of people using social care who receive self-directed support</p>	<p>The outturn is very high. Achieving 100% sets our aspiration but technically is unlikely given the need for the implementation of urgent packages on some occasions.</p>

Ref No. and Indicator Description	Comments and Proposed Intervention
<p>AC/C7 Percentage of DoLS applications completed within statutory timeframes</p>	<p>The first quarter of 2015/16 has seen an unprecedented number of applications with this set to increase as the number of applications made last year with a 12 month authorisation period come up for review. If this continues we can expect to see a minimum of 1100 applications by the end of 2015-16. This represents a 68% increase on last year.</p> <p>There are also high levels of DU activity supporting local residential care providers to make sure that they are providing safe and good quality care and are CQC compliant.</p> <p>The DU is recruiting to the team including training more in- house Best Interests Assessors. 5 more social workers have been trained as Assessors. We are seeking further guidance from legal services and benchmarking with other Local Authorities to develop further strategies in managing this unprecedented level of demand.</p>
<p>AC/C10 Percentage of clients receiving an on-going package of care reviewed (end of year projection)</p>	<p>The DU is targeting additional reviews in August and September of those people in receipt of ILF and meals, alongside those scheduled annual reviews. Some people are reviewed through other means e.g. educational or Care Programme Approach meeting and the DU needs to ensure that these are recorded appropriately going forward through raising awareness with staff. Work to enable greater productivity is on-going.</p>
<p>AC/C11 Average Number of days from contact to end of assessment</p>	<p>The increased number of days is being investigated further. Weekly performance meetings are on-going led by relevant Heads of Service. Regular support is in place for staff to record activity and to address any reporting errors.</p>
<p>AC/C12 Number of delayed transfers of care from hospital per 100,000 population (aged 18+)</p>	<p>See below. Overall performance is only slightly above the Q1 target. The indicator shows a 12-month rolling average monthly figure, reflecting the ASCOF calculation used to benchmark this indicator.</p>
<p>AC/C13 Number of delayed transfers of care from hospital, and those which are attributable to adult social care per 100,000 population (aged 18+)</p>	<p>The increase is in relation to mental health discharge delays and is related to small numbers of service users with very complex needs, where finding a suitable care provider post-discharge is difficult. Performance on acute hospital delays remains positive with delayed days remaining within target. Acute delays for June 2014-May 2015 stood at 88.8 days per 100,000 population and 3.0 patients per 100,000 population. The Head of Joint Commissioning is leading a project to identify an approach to improve mental health discharge pathways.</p>

### 3. Commissioning Intentions

Theme committees have agreed the commissioning intentions for the council up to 2020, the tables below provide an update on the progress.

#### 3.1 Overview of progress against Commissioning Intentions

RAG ratings				No. of Commitments due this quarter
Green – Commitment Met	Green Amber - Commitment delayed, Low Impact	Red Amber - Commitment delayed, Medium Impact	Red - Risk of Not Delivering Or High Impact	
100% (5)	0% (0)	0% (0)	0% (0)	5

#### 3.2 Commissioning Intentions

RAG	Description
Green	Commitment Met
Green Amber	Commitment delayed, Low Impact
Red Amber	Commitment delayed, Medium Impact
Red	Risk of Not Delivering Or High Impact

Commissioning Intention	RAG	Commentary
Commission high quality flexible specialist home support services including personal assistants (PAs)	Green	Work to prepare for the re-procurement of home care is on-track. Options for developing the PA market have been agreed and will now proceed to implementation.
Develop a more creative and cost effective review and support planning and process and ensure this considers how equipment and technology can increase independence	Green	Implemented Social Care Direct. Implemented new enablement and review of pathways (excluding mental health). Ongoing monitoring, management and review of new model ensuring benefits and performance targets are achieved.
Develop the employment support offer for adults with learning disabilities and ensure there are sufficient employment opportunities available in	Green	Inclusion of social value employment clauses in contracts where appropriate – being done  LD: Support planning routinely considers and evidences employment and

Commissioning Intention	RAG	Commentary
the Borough		<i>support to employment in line with Care Act Wellbeing principle. – On track.</i>
Establish a new 0-25 disabilities service (learning, physical disabilities; sensory impairments, mental health needs; complex needs) model to improve service quality and to promote increased independence of young adults and reduced costs to adult social care.	<i>Green</i>	<i>Continue to contribute to the development of the proposals.</i>
Increase the range of sustainable accommodation options for people with mental health problems in conjunction with the NHS.	<i>Green</i>	<i>Liaison with providers to facilitate move on, avoid admissions and robust support planning/ reviews. – On-going.</i>
Stimulate the market to encourage providers to effectively focus on enablement and personal development	<i>Green</i>	<i>Work of care quality team on-going to support this intention</i>

## 4. Financial

### 4.1 Revenue

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Budget V1	Q1 Forecast	Variation		
	£000	£000	£000	£000		
Community Wellbeing	(1,062)	390	380	(10)	Underspend in relation to supplies and services	-2.6%
Director of Adults and Communities	186	186	157	(29)	Underspend in relation to staffing	-15.5%
Social Care Management	596	(189)	(203)	(14)	Underspend in relation to staffing	7.4%
Safeguarding	732	732	924	192	The overspend is due to an increase in activity in the Deprivation of Liberty Safeguards (DOLS) service as a result of Supreme Court judgements in 14/15. The demand for this service is unpredictable and the LA has a legal duty to support clients who come forward for support.  In Q1 15/16 there were 284 DOLS assessments. The full year forecast is 1,136 assessments compared to 630 for 14/15 full year. £555k additional funding was agreed for 15/16 and £154k central government funding was received. The overspend is net of these 2 funding streams and there is a risk that year to date activity may continue throughout the year.	26.3%
Customer Care	751	344	332	(12)	Underspend to part year vacant posts	-3.6%
Customer Finance	788	814	771	(43)	Over-achievement of income for receivership and Apointeeship services	-5.3%
Performance and Improvement	1,027	787	733	(54)	Underspend to part year vacant posts	-6.8%
Care quality	1,064	1,064	1,036	(28)	Underspend mainly due to contract savings	-2.6%
Prevention & Well Being	3,538	5,417	5,348	(69)	Underspend to part year vacant posts	-1.3%
Integrated Care - Older Persons and Physical Disabilities	35,615	32,770	34,995	2,225	EMI Nursing and Residential are both areas of pressure within this line where client numbers are increasing reflecting Barnet's increasing older population. In the first quarter of the year, client numbers have increased by 65 across OA and EMI with an increase of 22 in residential and nursing care. The number of Home care clients has also increased by 33.  There is also pressure on this budget due to clients who were self-funders whose funds have depleted and are now the responsibility of the LA; the number of self-funders who come forward is difficult to predict but the LA has a legal duty to support clients unmet eligible needs.	6.8%
Integrated Care - Learning Disabilities & Mental Health	38,520	39,371	40,446	1,075	For LD, there has been an increase in demand since month 1 with client numbers increasing by 16 in the first quarter of the year. Residential client numbers have increased by 4 causing a significant pressure. Direct payments and Home Care clients have also increased by 6 and 3 respectively.  This area has also seen an increase in service users with Learning Disabilities mainly in relation to transitions clients where, over the last 4 years, there has been pressure on the service due to clients transitioning over from Childrens to Adults. This is made up of 2 elements – (1) New clients coming through and (2) an increase in cost for existing clients where there is no change in client needs. In Q1 this year, there has been an increase in client numbers of 13. The projections include £452k or new clients coming through but this is likely to be insufficient to meet demand.  There is also additional pressure resulting from 14 new Ordinary Residence clients. The projections include £573k for new OR clients in 15/16 but again this is likely to be insufficient to meet demand.  MH has also seen an increase in demand for Month 1 with client numbers increasing by 6; 5 of these being in supported living.	2.7%
<b>Total</b>	<b>81,756</b>	<b>81,686</b>	<b>84,920</b>	<b>3,234</b>		<b>4.0%</b>

Adults and Communities Month 3 Outturn position is showing a forecast overspend of £3.234m. The forecast includes £6.5m S256 allocations, adjustments for MTFs savings that are assumed will be achieved of £3.3m, ILF income totalling £1.375m, P&R funding of £3.5m, inflation bids of £783k, and £180k in relation to the 2.2% 2014/15 pay increases.

The increase in activity in the Deprivation of Liberty Safeguards (DOLS) service as a result of Supreme Court judgements in 14/15 continues to exert pressures in terms of how we meet current and future demands. We are reviewing our legal position as to how to balance this with meeting our statutory duties. In Q1 15/16 there were 284 DOLS assessments. The full year forecast is 1,136 assessments compared to 630 for 14/15 full year. £555k additional funding was agreed for 15/16 and £154k central government funding was received. The overspend is net of these 2 funding streams and there is a risk that year to date activity may continue throughout the year.

There is also additional pressure resulting from 14 new Ordinary Residence clients. The projections include £573k for new OR clients in 2015/16 but again this is likely to be insufficient to meet demand. For Learning Disabilities, there has been an increase in demand since month 1 with client numbers increasing by 16 in the first quarter of the year. Residential client numbers have increased by 4 causing a significant pressure. Direct payments and Home Care clients have also increased by 6 and 3 respectively.

EMI Nursing and Residential are both areas of pressure where client numbers are increasing reflecting Barnet's increasing older population. In the first quarter of the year, client numbers have increased by 65 across OA and EMI with an increase of 22 in residential and nursing care. The number of Home care clients has also increased by 33.

There is also pressure due to clients who were self-funders whose funds have depleted and are now the responsibility of the LA; the number of self-funders who come forward is difficult to predict but the LA has a legal duty to support clients unmet eligible needs.

## 4.2 Capital

	Original Budget 2015/16 as per Budget Book	Slippage C/fwd 2014/15	Revised Budget 2015/16	Q1 Slippage Incr Spend (+) Decr Spend (-)	Latest Budget 2015/16	2015-16 Forecast to year-end	Variance from Revised Budget	Slippage 2015-2016	2015/16 new budget
	£000	£000	£000	£000	£000	£000	£000	£000	£000
<b>Adults &amp; Communities</b>	1,400.66	1,187.25	2,587.91	457.00	3,044.91	3,044.66	0.25	-	-

## 5. Risk

The following is the 5 X 5 matrix 'heat map' highlighting the number of risks at a Directorate Level and where they are currently rated:

PROBABILITY	SCORE	IMPACT				
		1	2	3	4	5
		Negligible	Minor	Moderate	Major	Catastrophic
5	Almost Certain	0	1	1	3	0
4	Likely	0	0	2	0	0
3	Possible	0	2	10	3	0
2	Unlikely	1	1	1	4	1
1	Rare	0	0	0	0	0

### Risk Commentary for Delivery Unit:

We have structures in place to monitor service risks including Transformation Board which projects report to. There is adherence to project methodology.

- There are mitigations in place regarding the implementation of Mosaic with a refocus of staff resources to enable timely and accurate data migration.
- Financial Risk management plans are described elsewhere in this report. Budget pressures arise from significant demand and growth for adult social care services.
- There has been 3 periods of staff strike action and business continuity plans were enacted successfully.
- Summer heat wave risks are in place.

The following risk register lists those risks rated as 12 and above:

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0007 – Financial management – the risk of increased demand and the inability to deliver all planned savings projects leading to overspends and erosion of the Council's minimum reserve position.	Major 4	Almost Certain 5	High 20	SMT monitoring; Monthly leadership budget review. Finance training for Managers All savings targets have a saving owner, progress reported through Leadership team Regular meeting of Financial Sustainability Group Integra controls and complementary staff training	Treat	Quarterly	Moderate 3	Unlikely 2	Medium Low 6

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
				Development of turnaround plan					
AS0087 - The Care Act Universal Deferred Payment (UDP) Scheme could have significant impact on the Council's cash flow with increased expenditure and reduced income collection from 2015/16 until 2018/19. While under the Act the care costs can be re-cooped the risk remains that this will not be possible (i.e. dependants remain within the property).	Moderate 3	Likely 4	High 20	The Care Act is part of A&C Transformation Programme. Corporate Insight Reports and financial modelling has taken place to predict demand; these reports will be reviewed on a regular basis. The UDP Policy has been agreed. UDP requests to be monitored and reported monthly.	Treat	Quarterly	Negligible 1	Almost Certain 5	Medium Low 5
AS0088 - The Care Act increases the number of clients and carers who are entitled to either be assessed and / or receive a care package. This may increase the demand pressure on budgets; both to administer and provide care.	Moderate 3	Possible 3	High 20	The Care Act is part of the A&C Transformation Programme. Corporate Insight reports and financial modelling have identified demand and financial pressures relating to care, but further reports will include the potential administration cost pressure. The modelling will be revised on a regular basis. <ul style="list-style-type: none"> <li>- Phase 1 of the Care Act now has gone live</li> <li>- Regular monitoring in place.</li> <li>- Phase 2 of Care Act</li> </ul>	Treat	Quarterly	Moderate 3	Almost Certain 5	High 15

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
				project started					
AS0091 - Changes to the Mental Capacity Act arising from a recent Court ruling has led to an increase in the number of DoLS (Deprivation of Liberty) assessments required	Moderate 3	Almost Certain 5	15	Daily and weekly performance monitoring. Review of business process to ensure it is efficient but meets all the requirements identified within the Mental Capacity Act. Identifying resources to provide a sufficient service. In addition increased resources to key areas to minimise the risk further.	Treat	Quarterly	Minor 2	Almost Certain 5	Medium High 10
AS0044 - Information governance - risk that the Directorate may not be appropriately safeguarding personal information or responding to queries from members of the public.	Major 4	Possible 3	Medium High 12	Delivery Unit Information Management and Governance Group addressing key issues as it progresses with its work programme. It has representation from Corporate Information governance. Statutory Officers Group (Governance responsibilities) Caldicott Guardian		Quarterly	Moderate 3	Unlikely 2	Medium Low 6
AS0083 - If Adults and Communities are unable to put in place sufficient resources to meet the Care Act demand then they may be overwhelmed with Calls and Assessment requests. This may further generate a further Safeguarding Risk for missed calls	Major 4	Possible 3	Medium High 12	Agreed extra capacity in SCD x 2 FTE. Extra capacity to operational teams in place and contingency budgeted for additional resource from Care Act new burdens funding.	Treat	Quarterly	Major 4	Unlikely 2	Medium High 8

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0089 - Business Continuity Provider failure. The Care Act increases the current scope of the DU as it requires the Council to be the lead agency to make customers safe and enable the provision of care to be continued.	Moderate 4	Possible 3	Medium High 12	Restructured Care Quality Team went live in April 2015 to ensure the DU is resourced appropriately. The Care Act is part of the A&C Transformation Programme. The DU is developing a strategic approach with care providers to ensure their BCP is robust and to mitigate the risk to the Council.	Treat	Quarterly	Moderate 3	Likely 4	Medium High 12
AS0090 - The Care Act empowers self-funders to request the Council purchases care on their behalf due to the greater purchasing power of the Council. If many individuals wish to buy their care in this way then it is likely care providers will increase their care costs, be unable to provide care safely or cease to trade.	Moderate 3	Likely 4	Medium High 12	The Care Act is part of the A&C Transformation Programme. Consultation with providers regarding the potential implications of the Care Act will be monitored / evaluated. The financial modelling will provide indicative costs.	Treat	Quarterly	Moderate 3	Likely 4	Medium High 12
AS0094 - Staffing & Culture Quality of service provision cannot be guaranteed, the service is staffed by over 20% agency staff and they may leave with little notice.	Major 3	Likely 4	Medium High 12	Work is underway to complete recruitment campaign. Supervision and quality monitoring of agency workers.	Treat	Quarterly	Minor 2	Unlikely 2	Medium Low 4

## 6. Equalities

Equalities description	Comments and Proposed Intervention
	<p>All procurement activities which have started in 2015-16 have equalities impact assessments and relevant needs analysis. There are examples of engaging with adults who use service and carers through Partnership Board engagement and in the tendering of new contracts such as dementia services and carers support services. In so doing, officers are working closely with partners to make sure that we target people who may be more vulnerable due to their age, disability, religion or other protected characteristic.</p> <p>There are reviews of those people who receive Independent Living Fund as part of the changes.</p> <p>We recognise that some groups of people require targeted and tailored approaches to accessing information and advice about support available, and this is monitored through relevant contract monitoring. We are also looking to promote our advocacy support services better.</p> <p>We continue to monitor the impact of our savings proposals especially the Community Offer through reviewing individual case reviews and feedback through complaints.</p>

## 7. Customer Experience

Customer Experience description	Comments and Proposed Intervention
	<p>We are working closely with our current Lead Provider for carers services, to make sure that they are reaching hard to engage groups of carers and are helping with promotion of their services e.g. annual Carers week in June 2015, where feedback from carers was positive about the events that took place.</p> <p>A new service specification is being developed with a new contract jointly commissioned with Family Services being in place from April 2016. Carers and people who use services are taking an active part in shaping this and the new strategy for carers expected in the autumn 2015.</p>

Customer Experience description	Comments and Proposed Intervention
	<p>There has been a significant rise in contacts to the expanded Front Door service. We continue to work closely with Capita to further understand the nature of calls, and how this correlates with anticipated Care Act demands.</p> <p>Complaints and compliments –  The statutory requirement for a response to a complaint is 20 working days. We have responded at 82% to complaints and identify a responsible manager early and have a weekly escalation process in place.</p> <p>We have revisited our internal business pathways to improve our recording and monitoring of complaints. Lessons learned are currently reported to monthly Leadership team, and there are plans to share this more widely going forward as part of our Workforce development (check James). We now share compliments on our intranet pages for staff.</p> <p>FOI/SARS. We are responding to all requests in time (100%). There was a fall in the number of FOI requests in June; however those were received were complex. We have also developed new business pathways to improve our response to Public Health data requests, as this was a significant growth area. This also meets the requirements of the council's commitment to Transparency.</p>

## Appendix A

Performance indicators which have met or exceeded their target.

Ref	Indicator description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Type of indicator	Period Covered <i>Timeframe data has been measured</i>	Previous Result <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	Direction of Travel <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
AC/S 6	Percentage of adults with mental health needs who live in stable accommodation	Strategic	Apr-June 2015	70.9%	75.0%	617/767	80.4%	7.3%	Improving	
AC/S 9	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	Strategic	Apr-June 2015	475.1	100.0	47/51576	98.59	1.4%	Improving	
AC/S 19	Proportion of people who leave enablement with no care package	Strategic		70.0%	63.0%	212/303	70.0%	11.1%	Worsening	
AC/S 23	Number of people meeting their outcomes at support plan review	Strategic	Apr-June 2015	86.0%	90.0%	68/69	98.6%	9.5%	Improving	

<b>Ref</b>	<b>Indicator description</b> <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	<b>Type of indicator</b>	<b>Period Covered</b> <i>Timeframe data has been measured</i>	<b>Previous Result</b> <i>Previous result from the most relevant period</i>	<b>Target</b> <i>Achievement level expected</i>	<b>Numerator and Denominator</b> <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	<b>Result</b> <i>Most recent result of the indicator measurement</i>	<b>Target Variance</b> <i>A calculation of how far the outturn is from the target</i>	<b>Direction of Travel</b> <i>An assessment of whether performance has improved since the previous results</i>	<b>Benchmarking</b> <i>How performance compared to other councils</i>
AC/S 25	Percentage of social care Direct customers who are satisfied or very satisfied with the Service they have received post resolution	Strategic	June 2015	81.0%	85.0%	N/A	99.0%	16.5%	Improving	
AC/C 1	Total non-elective admission in to hospital (general & acute) all-age, per 100,000 population	Critical	Apr - May 2015	7742	1833	N/A	1539	16.0%	Improving	
AC/C 14	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64	Critical	Apr-June 2015	13.40	3.35	2/229329	0.87	74.0%	Improving	