

Adult Social Care Scrutiny Committee

Agenda

| | |
|---------------|--|
| Date: | Thursday, 27th September, 2012 |
| Time: | 10.00 am |
| Venue: | Committee Suite 1,2 & 3, Westfields, Middlewich Road, Sandbach CW11 1HZ |

The agenda is divided into 2 parts. Part 1 is taken in the presence of the public and press. Part 2 items will be considered in the absence of the public and press for the reasons indicated on the agenda and at the foot of each report.

PART 1 – MATTERS TO BE CONSIDERED WITH THE PUBLIC AND PRESS PRESENT

1. **Apologies for Absence**

2. **Declarations of Interest**

To provide an opportunity for Members and Officers to declare any disclosable pecuniary and non-pecuniary interests in any item on the agenda.

3. **Declaration of Party Whip**

To provide an opportunity for Members to declare the existence of a party whip in relation to any item on the agenda.

4. **Minutes of Previous meeting** (Pages 1 - 8)

To approve the minutes of the meeting held on 5 July 2012.

| | |
|----------------|--|
| Please contact | Mark Grimshaw on 01270 685680 |
| E-Mail: | mark.grimshaw@cheshireeast.gov.uk any apologies or requests for further information or to give notice of a question to be asked by a member of the public |

5. **Public Speaking Time/Open Session**

A total period of 15 minutes is allocated for members of the public to make a statement(s) on any matter that falls within the remit of the Committee.

Individual members of the public may speak for up to 5 minutes, but the Chairman will decide how the period of time allocated for public speaking will be apportioned, where there are a number of speakers

Note: In order for officers to undertake any background research, it would be helpful if members of the public notified the Scrutiny officer listed at the foot of the agenda, at least one working day before the meeting with brief details of the matter to be covered.

6. **Quarter 1 Finance and Performance Report** (Pages 9 - 30)

To consider the attached report of the Director of Finance & Business Services / Strategic Director, Places & Organisational Capacity.

7. **Briefing Paper on the White Paper 'Caring for our future: reforming care and support' (July 2012)** (Pages 31 - 50)

To consider a report of the Strategic Director of Children, Families and Adults.

8. **Adult Social Care Financial Systems - The Vision and Future Direction** (Pages 51 - 58)

To consider a report of the Head of Business Management & Challenge.

9. **Adult Services Debt** (Pages 59 - 66)

To consider a report of the Head of Business Management & Challenge.

10. **Empower Update** (Pages 67 - 74)

To consider a report of the Head of Business Management & Challenge.

11. **Work Programme update** (Pages 75 - 80)

To consider the work programme.

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Adult Social Care Scrutiny Committee**
held on Thursday, 5th July, 2012 at Committee Suite 1,2 & 3, Westfields,
Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor M J Simon (Chairman)

Councillors C Andrew, D Bebbington, I Faseyi, J Jackson, L Jeuda, S Jones,
F Keegan, B Murphy, B Silvester and P Hoyland

Apologies

Councillors D Stockton and J Saunders

In attendance

Councillors J Clowes and G Baxendale
Barrie Towse – Chairman, LINK
Bill Brookes – Vice-Chairman, LINK
Ed Beckett – Chairman, Carer's Reference Group
David Harvey - Chief Executive, Cheshire Carers Centre
Sue McDowell - Head of Involvement and Patient Experience and PCT Lead
for Carers

Officers

Lucia Scally - Head of Strategic Commissioning and Safeguarding
Rob Walker – Commissioning Manager
Jill Greenwood - Commissioning and Provider Service Manager
Lynn Glendenning - Commissioning Manager - SP & Contracts
Victoria Worthington – SMART Team Manager
Mark Grimshaw – Scrutiny Officer

1 MINUTES OF PREVIOUS MEETING

RESOLVED – That the minutes of the meeting held on 9 May 2012 be approved
as a correct record.

2 DECLARATION OF INTERESTS

None noted.

3 DECLARATION OF PARTY WHIP

None noted.

4 PUBLIC SPEAKING TIME/OPEN SESSION

Charlotte Peters Rock attended to address the Committee with regard to item 6: Carers Strategy and Implementation Plan Update report. She asserted that without adequate local care services, the work outlined in the carers strategy would fall short. Particular reference was made to the offer of respite holidays for family carers. Mrs Peters Rock contended that providing respite in isolation and in the absence of local services would not produce the outcomes desired by the Council or indeed service users.

She asserted that what was needed was a comprehensive health and social care strategy which would cover basic health needs and also make best use of community assets and support to provide added benefits.

Mrs Peters Rock also called on the Council to work closer with the NHS, Cheshire West and Chester Council and other abutting authorities.

The Chairman thanked Mrs Peters Rock for attending and her comments were noted.

5 CARERS STRATEGY AND IMPLEMENTATION PLAN UPDATE REPORT

Lucia Scally and Rob Walker attended to present the Carers Strategy and Implementation Plan Update report. Rob Walker explained that the purpose of the report was to inform Members of the progress of the Carer's Strategy and Work Plan since the ratification by Cabinet on 3 October 2011. He noted that the report also indentified some additional areas for inclusion in the Carers' Implementation Plan.

Lucia Scally acknowledged that the Carers' Strategy for Cheshire East had been developed in partnership with a number of agencies. With this in mind, she introduced Sue McDowell (Head of Involvement and Patient Experience and PCT Lead for Carers), Ed Beckett (Chairman, Carer's Reference Group), David Harvey (Chief Executive, Cheshire Carer's Centre) and Victoria Worthington, SMART team manager.

Rob Walker continued to provide a summary on the four key areas where significant progress had been made:

- 1) Young Carers – Rob Walker explained that this work was in an embryonic stage but that it had been aided by the merging of the children's and adult's directorates. Rob Walker reported that this work stream was necessary as the needs of young carers differed considerably from adult carers.
- 2) Carer's Needs Assessments – Victoria Worthington noted that during 2011/12, the Council completed 2910 carers' assessments out of 8176 (35.6% completion rate). This was in contrast to 2010/11 in which 1023 assessments were completed. She noted that the National Indicator target for carer's assessments was 28%. Despite being pleased to such an improvement, Victoria added that the service was working to improve not only the number of completions but also the quality of them.
- 3) Carer Development Link Worker/Trusted Assessors – As part of the work to improve the quality of carers' assessments, Rob Walker explained that the service had made successful use of Trusted Assessors to undertake

carers' needs assessments for those service users with mental health issues. This had been developed in conjunction with Making Space and further analysis was required to see if it could be rolled out to other client groups across the Borough.

- 4) Carers into Employment – Rob Walker explained that this was a very important issue and that the Council had already done some successful work to support Council employees that were in a caring role.

Rob Walker also outlined a number of strategic priorities relating to the Carers Strategy:

- 1) LINKs Respite Report – Rob Walker noted that the emerging concerns from this report had been added to the implementation plan.
- 2) Clinical Commissioning Groups (CCGs) – This was ongoing work to help CCGs to develop joint commissioning intentions to support carers. Sue McDowell noted that within GP Practices there were already identified Carers' Leads.
- 3) Carers' Support 'Map' – This had been developed by the Carer's team to support Carers in accessing the right information, advice and support to aid them in their caring roles.
- 4) Carers' Needs Assessment Pilot – Rob Walker reported that part of this work stream was to develop a 'Carer's Passport' so that carers would not have to keep repeating information to a number of different carer supporting agencies

Reference was made to a recent Carers Information Fair that had been held in Alsager. It was stated that this was a success and that it was a positive step in collecting intelligence to inform the work being done by the Carers Team. The Committee wished to place on record their thanks to the staff in the Adults Directorate who had given up their time to attend this and other similar events in their own time.

A number of comments were also made regarding the high quality of the report.

It was noted that the rise in completed carers assessments was impressive and pleasing to see. It was questioned how this had been achieved. Rob Walker reported that this could mainly be attributed to the work of the frontline staff in the SMART teams. Rob Walker continued to explain that the next question after performing an assessment was what could the Council offer the carer. He made reference to a pilot scheme in Crewe which had been funded by the PCT. This gave carers a small budget (£200-£500) which could be used on something to assist them in their caring role. Even though this was a small amount of money, feedback suggested that it had made a difference to people's lives and that the service was looking to roll this out across the Borough.

It was questioned why some people refused a carers' assessment. Rob Walker reported that this was currently unknown but that the service was working with the SMART teams to try and identify the reasons. Anecdotally, he suggested that it could partly be attributed to the timeliness of the assessment and also due to a lack of trust of social workers.

It was queried what services the Carers Team had for responding to carers' emergencies. Rob Walker explained that the service commissioned Cross Roads to provide emergency responses for carers and that the Cheshire Carers Centre also had a role to play. Indeed, David Harvey, Chief Executive – Cheshire Carers

Centre, explained that they had a free helpline which fielded approximately 4,500 calls a year. He reported that the calls tended to occur at points of crisis and therefore the Carers Centre was trying to help people plan for a crisis so that they would be better prepared. It was questioned whether the Carers Centre provided counseling. David Harvey reported that the service was better described as listening support and that they were looking to develop longer term counseling support.

It was questioned how carers were made aware of the services that were available to them. Rob Walker reported that the service produced a carers pack which was circulated through the SMART teams and partner organizations. Councillor Clowes added that a crisis was usually precipitated by an event which would bring a person into contact with agencies that would pass on information and telephone numbers for services. Sue McDowell also reaffirmed that there was a PCT funded Carer Support link worker in all GP practices who could disseminate information. Having heard all of this, the Committee still felt that the marketing and communication of the services that were available to carers needed to be improved. It was stated that the lack of publicity of the services could negate all of the other good work that was going on to support carers. It was suggested therefore that the service develop a creative marketing and communication strategy to sit alongside the carers strategy.

RESOLVED –

- a) That the Committee continues to endorse the implementation of the Carers' Strategy.
- b) That the Committee notes the progress of the work on the Carers' strategy Implementation Plan.
- c) That the Committee continues to support and acknowledge, through all engagement and communications with Carers, the Council's continued commitment and acknowledgement of them as 'Expert care Partners' treating all Carers with dignity and respect.
- d) That the Service explore developing a marketing and communications strategy to promote the services that the Council and its partners offer to carers.

6 PROPOSAL FOR DEVELOPMENT OF RESPITE SERVICE

Lynn Glendenning, Commissioning Manager - SP & Contracts, attended to present to the Committee a proposal for the development of a respite service in the Crewe and Nantwich area. Explaining the background to the proposal, Lynn Glendenning, reported that Queens Drive in Nantwich was due to close following the Adult Social Care Services Review as the facility had been deemed not fit for purpose and too costly to adapt. A consultation was held to find a suitable alternative. It had been suggested to offer provision at Mountview in Congleton but some service users had noted this could generate issues around transport.

Following the consultation process, a proposal was put before Cabinet on 5 March 2012 to offer alternative respite provision at a modified self contained unit at Lincoln House, Crewe in addition to Mountview. This proposal was endorsed.

Lynn Glendenning continued to report that after the Cabinet decision, some members of the public had continued to maintain that Lincoln House and Mountview were inadequate alternatives. In respect of Lincoln House, the objections were based upon the idea, perceived by some, that it was a centre for older people and therefore inappropriate for younger service users.

On the 13 May 2012, the service had received a letter from a company called 3L Care who wished to lease an empty property in Haslington to provide respite care. This property had previously been used by Cheshire and Wirral PCT for short term health respite for people with a learning disability and was owned by Cheshire East Council.

A number of discussions were held between the Council and 3L Care regarding the proposal but after it had become clear that the Council would have to tender for the lease to the property, 3L Care decided to seek and source an alternative building in the private sector, which Lynn Glendenning noted they had now done so.

Lucia Scally outlined the next steps in the proposal. She reported that the Council had invited the families that had received services at Queens Drive to meet with 3L Care and then Council officers would have a private discussion with families on their preferences. The result of this process would feed into the final report which was scheduled to go to Cabinet on 20 August 2012.

Councillor Janet Clowes added that the proposal was a good example of carers having a degree of autonomy but the Council needed to be sure that the offer was robust and sustainably financially and most importantly that it would offer high quality care for the service users.

It was queried whether 3L Care had experience of delivering respite care and if so, whether they had been inspected by the Care Quality Commission (CQC). Lucia Scally noted that they were a relatively new company but that they did have a site in Cheshire West and Chester which had been cleared by their robust approval framework. It was added that this site was to be inspected by the CQC on 1 August 2012.

It was questioned whether the offer of adapting Lincoln House would still be available if the 3L Care proposal was not successful. Lucia Scally confirmed that the Lincoln House option would still be available.

RESOLVED –

- a) That the Committee endorse the Council in continuing to work with the private market to expand the choices available for respite provision in the Cheshire East area.
- b) That the Committee endorse the re-examination of the decision to remodel services at Lincoln House in the light of any changes to planned provision in the area.

7 RESIDENTIAL PROVISION TASK AND FINISH REVIEW

The Committee gave consideration to the report of the Task and Finish Group which looked at Residential Provision in Cheshire East. As Chairman of the review, Councillor Frank Keegan provided a quick précis of the main themes in the report. He described that as a totality the recommendations were an attempt to try and establish the principle of the Electorate assuming responsibility for their own care and that the Council's role within this was to help and facilitate. This would hopefully have the effect of helping people to stay in their own homes for longer rather than entering expensive residential care. Explaining the rationale behind the principle Councillor Keegan noted that firstly, it was what people wanted and secondly, carrying on with a 'business as usual approach' would be unaffordable and unsustainable in an increasingly pressured funding environment. The Group had also been influenced by Maslow's Hierarchy of Need, particularly in the way it emphasised a holistic approach to people's needs. Councillor Keegan explained that the Group had reached the conclusion that the upper echelons of the hierarchy could be better achieved by older people remaining in their own homes and being part of the community.

Moving on to detail how this principle might be achieved, Councillor Keegan asserted that the Council needed to be pro-active and think creatively about how it might offer services in a different way. Outlining a proposal in the report, Councillor Keegan explained the idea of 'social care hubs' which would be locally defined entities co-ordinating partnership working and funding whilst hosting a variety of recreational and social activities. Councillor Keegan acknowledged that the detail of how the hubs would function was not yet finalised but suggested a role for the Scrutiny Committee in scoping out their remit in subsequent meetings.

Other Members of the task group highlighted the following issues in the report:

- That the co-ordination of services across the Council required improvement
- That the Council needed to explore providing additional sheltered accommodation in the North of the Borough
- That the Council's planning service needed to become more involved with the care of the elderly
- That support for carers was vital to helping people to remain in their own homes and independent.

Councillor Janet Clowes welcomed the report and confirmed that it had reaffirmed some areas of work that were already ongoing whilst providing some new ideas which would need further thought.

The Chairman thanked Councillors Frank Keegan, Laura Jeuda, Irene Faseyi, Shirley Jones and Janet Jackson for all their hard work in putting together the report.

RESOLVED

- a) That the report of the Scrutiny Task and Finish Group be approved
- b) That the recommendations of the Group be endorsed, and referred to the Cabinet for consideration and necessary action, and that Cabinet be invited initially to comment on the details of the recommendations.

- c) That the Cabinet response be included on the Committee's work programme to possibly inform further action.

8 WORK PROGRAMME UPDATE

The Committee considered the work programme. Reference was made to a potential training session on learning difficulties. Lucia Scally mentioned that the Health and Wellbeing Scrutiny Committee was also interested in training on the same issue and therefore it was suggested that a joint event be arranged.

RESOLVED –

- a) That the work programme be noted
- b) That the Scrutiny Officer arrange a joint training event with the Health and Wellbeing Scrutiny Committee on learning disabilities and the pressure that they bring on the adult services budget.

The meeting commenced at 10.05 am and concluded at 12.55 pm

Councillor M J Simon (Chairman)

This page is intentionally left blank

First Quarter Review of Performance 2012 / 2013

Adult Social Care Directorate

August 2012

Introduction

As part of the annual performance reporting framework set out in the Finance and Contract Procedure Rules, regular reports are required to be published. The Council is committed to high standards of achievement and continuing improvement. The report reflects a developing framework to embed performance management culture throughout the organisation.

The report provides an update of the Council's financial and non-financial performance at the first quarter stage of 2012/2013, and also seeks Member approval to Supplementary Revenue and Capital Estimates and Virements. An overview and summary financial table are provided at the beginning of the report.

Section 1 of the report provides projections of service revenue financial performance for the 2012/2013 financial year. It focuses on the key financial pressures which the Council's services are facing, areas of high financial risk to the Council, and the remedial measures identified by services to mitigate these pressures. Key issues affecting service capital schemes are also reported.

The figures included in this section reflect the original Business Plan adjusted for Supplementary Estimates and Virements, including those requested in the report. These updated budget figures will be reflected in Version 2 of the Budget Book which will be published shortly.

Section 2 provides a summary of the key non financial performance headlines for the year to date.

Appendices are provided as follows:-

- **Appendix 1** provides explanations of changes to the Revenue Budget agreed at Council in February 2012 which have been authorised or require authorisation via this quarterly report.
- **Appendix 2** lists requests for Supplementary Revenue Estimates funded from additional grant.
- **Appendix 3** analyses the position on Outstanding Debt.
- **Appendix 4** summarises the Capital programme and its funding.
- **Appendix 5** lists capital budget adjustments to be noted.
- **Appendix 6** lists requests for Supplementary Capital Estimates and Virements up to £1m.
- **Appendix 7** shows the latest position on the Corporate Grants register.
- **Appendix 8** details progress against Performance Indicators.

1. Directorate Financial Summary

Introduction

1. This section provides details of the key revenue and capital issues emerging from the first quarter review. It highlights the main budget pressures faced by the Council, and remedial actions proposed to mitigate these pressures.

Adults

2. The Adults Service has a net budget of £98.6m, (including £6.2m that has been transferred to the Council by the Department of Health linked to the Learning Disability, Valuing People Now Transfer) with **Table 3** providing a summary of the emerging pressures position of £11.4m. Remedial action of £7.3m has been identified which will reduce the net forecast position to an estimated £4.1m overspend.

Table 3 – Adults

| | REVENUE | | | | Paragraph Number(s) |
|--------------------------------------|--------------------------|-----------------------|---|---------------------------------|------------------------|
| | Revised Net Budget | Emerging Pressures | Remedial Measures Identified to Date | Current Forecast Variance | |
| | £000 | £000 | £000 | £000 | |
| | | | | | |
| Adults | | | | | |
| Care4CE | 0 | 383 | -575 | -192 | |
| Strategic Commissioning | 36,085 | 3,200 | -450 | 2,750 | 20-23 |
| Business Management and Challenge | 3,034 | 170 | -400 | -230 | |
| Individual Commissioning | 58,851 | 7,643 | -5,575 | 2,068 | 24-28 |
| Cost of Investment | 650 | 0 | -300 | -300 | |
| | 98,620 | 11,396 | -7,300 | 4,096 | 29-35 |

Key Revenue Issues

3. The Adults Service continue to face extreme budget pressures in relation to care costs, this is a combination of inherent budget pressures from 2011/2012 and historic contract arrangements that the Council is party to (e.g. Learning Disability Health Contracts).
4. Whilst there has been some growth in the number of new customers entering services (some have been high cost placements), the service is maintaining steady customer numbers, although there is evidence that the complexity of need is resulting in continuing increases in costs for those in receipt of Council care.

Strategic Commissioning

5. Health contracts providing supported living for customers with Learning Disabilities (within the Learning Disability pooled budget) are presenting a pressure of £2.2m. The providers supporting the

delivery of the health contracts are expected to review staff terms and conditions, however, apart from one provider, limited progress has been made and there has been no reduction in the rates that the Council pays.

6. The Secure Commissioning contract with Cheshire and Wirral Partnership within the Learning Disability Pooled budget has a budget pressure of £0.2m. Commissioners are aiming to work with Cheshire and Wirral Partnership to understand and reduce this overspend.
7. The Service had £0.8m of unallocated savings target remaining from earlier years to achieve, £0.2m is expected to be delivered in 2012/2013 through remedial action. The full year effect of this target will be achieved in 2013/2014 through a review of existing contracts that cannot be adjusted in 2012/2013 as they are already fully committed.
8. An independent review of the fee rates paid to nursing and residential care providers and the associated contractual framework has been commissioned as part of the Local Government Association and Association of Directors of Social Services national Efficiency Programme. The commission has been awarded to the consultants Red Quadrant who are progressing with the review aiming to deliver the outcomes in September / October 2012. The Council has not increased fees to providers since April 2010 and the current forecast variance assumes no change to the existing rates paid to providers. Another element of the review being undertaken by Red Quadrant is to assess the actions and measures being considered across the service against best practice elsewhere, aiming to identify any potential areas for further exploration by the Council. This element of the report is anticipated to be completed over the coming few weeks, with a report being available in early September.
9. The permanent care cost pressures of £5.5m identified in 2011/2012 which were alleviated by the application of temporary funding continue to present an ongoing pressure in 2012/2013. This is before any new 2012/2013 growth pressures have been factored in. The service is seeking to contain the forecast overspend by using proactive measures to manage demand for care and analysing the costs associated with increasingly complex care packages.
10. Pressures are also arising as a result of people choosing to self fund in residential & nursing settings and then running out of money which results in costs falling to the Council. Initial research indicates this increases overall costs as self funders tend to opt for higher levels of care, and at an earlier stage, than the Council would recommend, given the range of pre-admission options available. However, the service continues to work to minimise the impact of returning self funders, successfully managing to retain costs within the contractual rates offered by the Council.
11. The delivery of the transport savings in relation to de-commissioning the transport fleet are no longer expected to be achieved in 2012/2013 due to a withdrawal from the market of a key provider who would have offered alternative support to users. This is creating an initial pressure of £0.5m, which is currently being reviewed to see what potential mitigation is possible.
12. Whilst all policy saving targets have been allocated, the full year effect of some of these initiatives will not be delivered until 2013/2014 (i.e. due to contractual agreements, need for building alterations etc).
13. In 2011/2012 the service held a number of staff vacancies and key management positions were not factored into the service structure. The staffing structure has been reviewed in 2012/2013 and the base staff budget has been increased to not only reflect the base

Individual Commissioning

position required to fund the overall structure but also to reflect the managerial input required to reduce the likelihood of judicial review (the Council were subject to a number of challenges in 2011/2012) and to increase the number of front line workers.

14. The overall and continuing gross pressure being experienced across the Adults Service is not financially sustainable for the Council. Numbers of service users have remained broadly constant for a number of months; the challenge is therefore to maintain this position whilst better controlling the costs, be that through better management of the impact of increasing complexity, or through rationalising the contractual and commissioned arrangements. Recognising this, the Service have commissioned via the consultants Red Quadrant, an external review of the policy options that the service are working towards identifying whether they are achievable and also to advise of other potential areas to review.
15. The aim of the review activity is to focus on quick wins in the short term, whilst developing options for the medium and long term. This may involve focussing on particular areas to solve specific issues such as the absence of a framework contract with established rates. Alongside this, an independent review of the current care cost structure is being carried out to ascertain whether the current care prices paid to providers are reasonable.
16. In addition, Red Quadrant are helping to facilitate participation in a number of multi council working groups who are sharing initiatives and data. Through this joint working, the Council is benchmarking itself alongside other councils helping to identify those areas where best practice can be adopted.
17. The remedial action for the Service is primarily focused on continuing to control the flow of new care clients whilst maintaining and delivering statutory services; reviewing commissioned

contracts with providers; and completing existing customer reviews to ensure that they are meeting outcomes.

18. The Council has sought to maximise the use of Care4CE during the year and has made significant progress in increasing the occupancy and usage of the facilities provided. The remedial action plan assumes that this action will be continued and increased resulting in an overall underspend being anticipated across Care4CE.
19. In the longer term, a fundamental review of key contracts (learning disability; mental health; and personal support contracts) is expected to ensure that the service have negotiated the best possible value for the Council.
20. A remedial action plan has been agreed and risk assessed with the Adults Heads of Service and the £7.3m of remedial action savings are expected to be delivered. The aim is to continue to monitor the delivery of the action plan throughout the remainder of the financial year, reporting on progress at regular intervals and where possible identifying where either additional mitigation might be possible, reducing the risk and deliverability of those actions that have been assessed as higher risk and reporting where delivery might not be possible.

Capital

21. The main capital developments within Adults include a replacement ICT system for the Children, Families and Adults service and the buildings investment budget.
22. The service has received a capital allocation of £764,385 from the Department of Health for Personal Social Services and this will be used as additional funding for the ICT system replacement.
23. The main procurement and implementation activity for the system replacement is planned to take place in 2013/2014.

24. An allocation of £456,000 has been made from the ICT budget provision to fund Careworks which provides a solution to capture and manage forms, i.e., assessment, care and support plans within a multiple agency working environment. Details of the virement request are provided in **Appendix 6**.

2. Performance Report - Strategic Director Places & Organisational Capacity

2012/2013 Quarter One Performance

25. This section provides a high level summary of the key performance headlines for the first three months of 2012/2013.
26. For external reporting purposes at the end of quarter one, the Council continues to report on a basket of measures retained within service plans from the former National Indicator Set, and the former Best Value Performance Indicator Set. In total 23 measures will be externally reported on a quarterly basis during 2012/2013, with additional measures being reported at year-end.

Performance Measure Tolerances (Red/Amber/Green ratings)

27. The Council's electronic monitoring and performance system (CorVu) is pre-populated with a five percent tolerance against the targets set by service areas, meaning that the system assigns a 'red' assessment to performance data 5% (or more) short of the target, an 'amber' assessment to data within 5% of the target, and a 'green' assessment to data performing on or above target. Where strong cases are made for the revision of tolerances (e.g. where a 5% tolerance is not appropriate due to a measure's data return format), tolerances will be revised to support individual targets. In all other circumstances, the 5% tolerance will remain in place for performance measure reporting in 2012/2013.

Revision to Reporting Frequency of Household/Municipal Waste Figures

28. The following indicators:

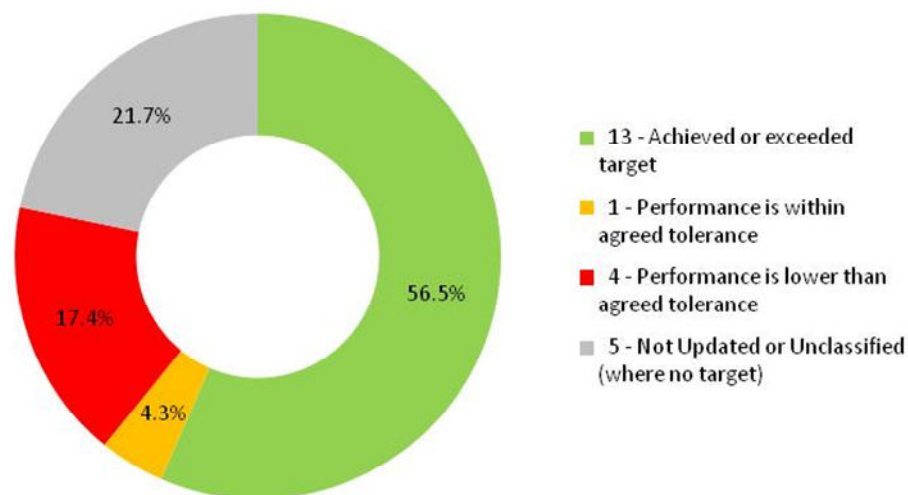
- NI 191 (Residual household waste per head)
- NI 192 (Household waste recycled and composted)
- NI 193 (Municipal waste land filled)

are annual indicators calculated by central government on the basis of data submitted to the Council by DEFRA. Due to the highly seasonal and weather dependent nature of these figures, which results in the greatest variation falling in the last two winter quarters, these indicators will be reported annually going forward.

2012/2013 Quarter One Performance Against Target

29. Performance assessments (red; amber; green) were made based on performance against target.

2012/2013 Q1 Actual vs Target



30. **56.5%** of measures are on target or exceeding their target at 2012/2013 First Quarter.

31. However **17.4%** did not achieve their quarterly target:

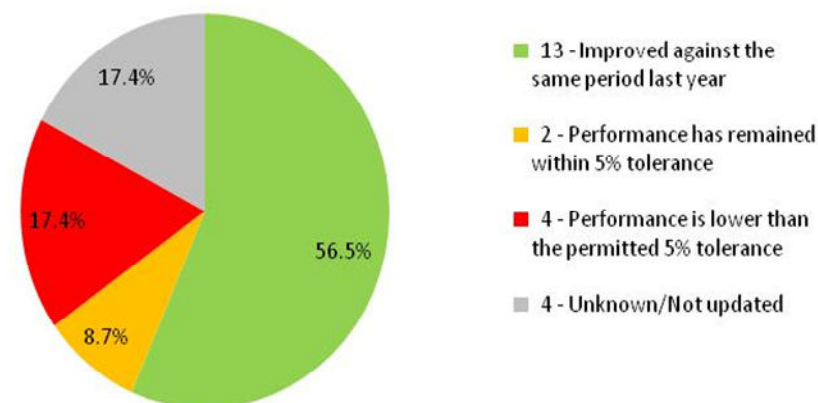
| Directorate | Reference | Definition |
|----------------------------------|-----------|--|
| Children, Families & Adults | NI 59 | Initial assessments for children's social care carried out within 7 working days of referral |
| | NI 60 | Core assessments for children's social care that were carried out within 35 working days of their commencement |
| Places & Organisational Capacity | NI 155 | Number of affordable homes delivered |
| Human Resources | BV 12 | Working days lost due to sickness absence |

(See Appendix 10 for further details)

Year On Year Direction Of Travel

32. Performance assessments (red; amber; green) have been made based on current performance compared to Q1 2011/2012.

June 2011 vs June 2012



33. The 4 (17.4%) measures which failed to achieve the same level of performance when compared to the same period last year were:

| Directorate | Reference | Definition |
|-----------------------------------|------------------|--|
| Children, Families & Adults | NI 59 | Initial assessments for children's social care carried out within 7 working days of referral |
| | NI 60 | Core assessments for children's social care that were carried out within 35 working days of their commencement |
| | NI 125 | Achieving independence for older people through rehabilitation/intermediate care |
| Human Resources | BV 12 | Working days lost due to sickness absence |

(See Appendix 10 for further details)

Appendices to First Quarter Review of Performance 2012 / 2013

August 2012

Appendix 1 – Changes from Original Budget 2012/2013

| | Original Net Budget £000 | Additional Grant Funding £000 | Allocations from Reserves £000 | Restructuring & Realignments £000 | Other Virements £000 | Revised Net Budget £000 |
|--|-----------------------------------|--|---|---|----------------------------|----------------------------------|
| <u>Children & Families</u> | | | | | | |
| Directorate | 3,346 | | | -2,584 | | 762 |
| Safeguarding & Specialist Support | 26,872 | | | -260 | -77 | 26,535 |
| Early Intervention & Prevention | 10,632 | 622 | 45 | 607 | | 11,906 |
| Strategy, Planning & Performance | 16,936 | | | 2,237 | -34 | 19,139 |
| Cost of Investment | 650 | | | | | 650 |
| | 58,436 | 622 | 45 | 0 | -111 | 58,992 |
| <u>Adults</u> | | | | | | |
| Care4CE | -1,144 | | | 1,144 | | 0 |
| Strategic Commissioning | 30,778 | 293 | | -1,144 | 6,158 | 36,085 |
| Business Management and Challenge | 2,863 | | | | 171 | 3,034 |
| Individual Commissioning | 58,889 | | | | -38 | 58,851 |
| Cost of Investment | 650 | | | | | 650 |
| | 92,036 | 293 | 0 | 0 | 6,291 | 98,620 |
| CHILDREN, FAMILIES & ADULTS | 150,472 | 915 | 45 | 0 | 6,180 | 157,612 |

Appendix 2 – Matters for Decision – Supplementary Revenue Estimates Funded from Additional 2012/2013 Grants

| Service | Awarding Body | Grant | £000 | Details of Service Bid |
|---------------------|---------------|---|------|--|
| Children & Families | CLG | Troubled Families Initiative | 522 | General purpose - no direct conditions on grant usage. Further grant receivable on payments by results basis (potentially £130k). The Troubled Families Financial Framework is a results-based funding scheme which allows local authorities to receive additional funding to deal with troubled families and meet the cost of the extra interventions that can help turn around these families' lives. The funding will be paid primarily on a payment-by-results basis, with 80% being received up front as an attachment fee, £521.6k in 2012/2013, and the remainder paid once the desired outcomes for these families are achieved, which is anticipated to be 12 months after the intervention starts. In addition £100k has been allocated to fund the Troubled Families Co-ordinator. |
| Children & Families | CLG | Troubled Families Initiative - Co-ordinator | 100 | |
| Adults | DoH | Learning Disability and Health Reform | 293 | <p>General purpose - no direct conditions on grant usage.</p> <p>This funding is as a result of the increased allocation on the 2011/12 level of grant. This will be used to offset against the Learning Disability Pooled budget overspend due to inherent budget pressures in this area. The additional funding includes £19k for Local Authorities to take over the responsibility of signposting members of the community to information about social and health services through local healthwatch schemes with effect from October 2012. This is a transfer of responsibility from the NHS to Local Authorities. This funding is to help with the start up costs of setting up of local healthwatch schemes. Healthwatch will be independent consumer champions for the public, to promote better outcomes in health and social care.</p> <p>Note - £6.128m previously included within the Adults budget as invoiced income from PCT is now being received directly as part of the Learning Disability & Health Reform grant as reflected in Appendix 8.</p> |

Appendix 3 – Debt Management

In addition to the collection of Council Tax and National Non-Domestic Rates the Council also issues invoices to organisations or individuals for certain key services. Performance related to Council Tax and Non-Domestic Rates is contained in **Section 2** of this report.

Total Invoiced Debt at the end of June 2012 was £5.9m. After allowing for £1.4m of debt still within the payment terms, outstanding debt stood at £4.5m. This is £1.7m lower than at 31st March mainly due to settlement of significant “year-end invoices” raised in Adults Services.

The total amount of service debt over 6 months old is £2.8m which is £0.2m higher than the level of older debt reported at the final outturn as at 31 March 2012.

Services have created debt provisions of £2.5m to cover this debt in the event that it needs to be written off.

The Council uses a combination of methods to ensure prompt payment of invoices. Recovery action against unpaid invoices may result in the use of debt collectors, court action or the securing of debts against property.

An analysis of the invoiced debt provision by directorate is provided in the table:

| | Outstanding Debt £000 | Over 6 months old £000 | Debt Provision £000 |
|--|-----------------------------|------------------------------|---------------------------|
| Children & Families | 403 | 338 | 225 |
| <i>Children & Families</i> | 376 | 312 | 197 |
| <i>Schools</i> | 28 | 26 | 28 |
| Adults | 2,302 | 1,713 | 1,606 |
| Total Children, Families & Adults | 2,705 | 2,051 | 1,831 |
| Waste, Recycling & Streetscape | 477 | 198 | 143 |
| Highways & Transport | 417 | 250 | 176 |
| Community | 172 | 93 | 93 |
| Development | 742 | 248 | 214 |
| Performance, Customer Service & Capacity | 7 | 3 | 3 |
| Total Places & Org Capacity | 1,815 | 792 | 629 |
| Finance & Business Services | 15 | 5 | 4 |
| HR & OD | 2 | 1 | 0 |
| Borough Solicitor | 5 | 1 | 0 |
| Total Corporate Services | 22 | 7 | 4 |
| TOTAL | 4,542 | 2,850 | 2,464 |

Appendix 4 – Summary Capital Programme and Funding

| Department | Original In-Year Budget | SCE's/ Virements Qtr 1 | Revised In-Year Budget | Reprofiled to Future Years | Forecast Budgets | | | |
|------------------------------------|-------------------------|------------------------|------------------------|----------------------------|------------------|---------------|---------------|--------------------|
| | 2012/13 £'000 | 2012/13 £'000 | 2012/13 £'000 | 2012/13 £'000 | 2012/13 £'000 | 2013/14 £'000 | 2014/15 £'000 | Post 2014/15 £'000 |
| Adults | | | | | | | | |
| New Starts | 4,481 | 456 | 4,937 | -2,882 | 2,055 | 2,673 | 520 | 0 |
| Ongoing schemes | 20 | 0 | 20 | 0 | 20 | 0 | 0 | 0 |
| | 4,501 | 456 | 4,957 | -2,882 | 2,075 | 2,673 | 520 | 0 |
| Children & Families | | | | | | | | |
| New Starts | 6,289 | 4,014 | 10,303 | -4,690 | 5,613 | 7,445 | 0 | 0 |
| Ongoing schemes | 21,065 | -3,988 | 17,077 | -4,680 | 12,397 | 5,732 | 0 | 0 |
| | 27,354 | 26 | 27,380 | -9,370 | 18,010 | 13,177 | 0 | 0 |
| Places & Organisational Capacity | | | | | | | | |
| New Starts | 24,634 | 3,534 | 28,168 | -2,022 | 26,145 | 11,605 | 10,735 | 1,352 |
| Ongoing schemes | 33,093 | -1,612 | 31,481 | -7,441 | 24,040 | 14,541 | 3,589 | 0 |
| | 57,727 | 1,922 | 59,649 | -9,464 | 50,186 | 26,146 | 14,324 | 1,352 |
| Finance, Legal & Business Services | | | | | | | | |
| New Starts | 7,915 | 2,375 | 10,290 | 0 | 10,290 | 12,852 | 9,345 | 6,624 |
| Ongoing schemes | 3,468 | -2,375 | 1,093 | 0 | 1,093 | 829 | 0 | 0 |
| | 11,383 | 0 | 11,383 | 0 | 11,383 | 13,681 | 9,345 | 6,624 |
| Total New Starts | 43,319 | 10,379 | 53,698 | -9,594 | 44,103 | 34,575 | 20,600 | 7,976 |
| Total Ongoing schemes | 57,646 | -7,975 | 49,671 | -12,121 | 37,550 | 21,102 | 3,589 | 0 |
| Total Capital Expenditure | 100,964 | 2,404 | 103,368 | -21,715 | 81,653 | 55,678 | 24,189 | 7,976 |

NOTE: The figures in this table are subject to the comprehensive review of the Capital Programme to be undertaken prior to the Mid Year Review, and may therefore be subject to significant change.

| Funding Source | Forecast Expenditure | | | |
|-----------------------------------|----------------------|---------------|---------------|---------------|
| | 2012/13 £'000 | 2013/14 £'000 | 2014/15 £'000 | 2015/16 £'000 |
| Grants | 38,492 | 11,236 | 2,546 | 0 |
| External Contributions | 1,620 | 523 | 10 | 0 |
| Linked/Earmarked Capital Receipts | 676 | 676 | 676 | 1,352 |
| Supported Borrowing | 2,128 | 1,133 | 0 | 0 |
| Non-supported Borrowing | 21,030 | 33,853 | 11,294 | 0 |
| Revenue Contributions | 498 | 450 | 0 | 0 |
| Capital Reserve | 17,208 | 7,807 | 9,663 | 6,624 |
| Total | 81,653 | 55,678 | 24,189 | 7,976 |

Appendix 5 – Requests for Budget Adjustments within Programme to Consolidate Funding

Cabinet is asked to note the following Budget adjustments.

These Budget adjustments are wholly within the same Project/Programme/Block allocation category but across Starts Years and are required to consolidate Programme / Block budgets.

| Capital Scheme | Starts Year | Amount Requested £ | SCE/ Virement/ Reduction | Funding of SCE/Virement | Virement FROM ... | |
|---|-------------|--------------------|--------------------------------|---|-------------------|--------------------|
| | | | | | Starts Year | Amount Requested £ |
| <u>Children, Families & Adults</u> | | | | | | |
| Devolved Formula Capital - In Advance | 2009/10 | 109,000 | Virement | Devolved Formula Cap 2008/09 East | 2008/09 | 109,000 |
| DFC Grant | 2012/13 | 4,014,000 | Virement | Devolved Formula Capital 2007/08 - 2011/12 | 2009/10 | 4,014,000 |
| <u>Places & Organisational Capacity</u> | | | | | | |
| Community Services | | | | | | |
| Other Car Parking Improvements | 2012/13 | 329,649 | Virement | Car Park Improvements - 2010/11 - 2011/12 | 2011-12 | 329,649 |
| Development | | | | | | |
| Minor Works 2012/13 | 2012/13 | 210,323 | Virement | MINOR WORKS 2011/12 | 2011/12 | 210,323 |
| Farms Strategy | 2012/13 | 1,245,431 | Virement | Farms Estates Reorganisation & Reinvestment | 2009/10 | 1,245,431 |
| Asset Management Service Block 12/13 | 2012/13 | 1,035,636 | Virement | Asset Management Service Block 2011/12 | 2011/12 | 1,035,636 |
| Total SCE's, Virements and Budget Reductions | | 6,944,039 | | | | 6,944,039 |

Appendix 6 – Request for Supplementary Capital Estimates (SCEs) and Virements up to and including £1,000,000

Cabinet are asked to approve SCE and Virements up to and including £1,000,000.

| Capital Scheme | Starts Year | Amount Requested £ | SCE/ Virement/ Reduction | Funding of SCE/Virement | Virement FROM ... | |
|--|-------------|--------------------|--------------------------|---|-------------------|--------------------|
| | | | | | Starts Year | Amount Requested £ |
| <u>SUPPLEMENTARY CAPITAL ESTIMATES</u> | | | | | | |
| <u>Children, Families & Adults</u> | | | | | | |
| Havannah Primary School | 2011/12 | 25,744 | SCE | Havannah Primary School - From School Funds | | 25,744 |
| Combined ICT Project | 2012/13 | 764,385 | SCE | Personal Social Services Grant | | 764,385 |
| <u>Places & Organisational Capacity</u> | | | | | | |
| <u>Highways & Transport</u> | | | | | | |
| S278 - Chapel Street, Seddon | 2010/11 | 400 | SCE | Fully funded by Developer Contributions | 2010/11 | 400 |
| S278 - Park House Farm | 2007/08 | 2,000 | SCE | Fully funded by Developer Contributions | 2007/08 | 2,000 |
| S278 - Former Oakland School, Wilmslow | 2012/13 | 3,000 | SCE | Fully funded by Developer Contributions | 2012/13 | 3,000 |
| S106 - Jackson Ave, Nantwich | 2012/13 | 5,000 | SCE | Fully funded by S106 Developer Contributions | 2012/13 | 5,000 |
| S278 - Portland Drive, Gladedale | 2011/12 | 9,000 | SCE | Fully funded by Developer Contributions | 2011/12 | 9,000 |
| S106 - UTC Macclesfield | 2012/13 | 10,729 | SCE | Fully funded by S106 Developer Contributions | 2012/13 | 10,729 |
| S106 - Statham Street, Macclesfield | 2012/13 | 11,829 | SCE | Fully funded by S106 Developer Contributions | 2012/13 | 11,829 |
| S106 - Victoria Rd, Macclesfield | 2012/13 | 23,000 | SCE | Fully funded by S106 Developer Contributions | 2012/13 | 23,000 |
| S106 - Broken Cross, Macclesfield | 2012/13 | 50,000 | SCE | Fully funded by S106 Developer Contributions | 2012/13 | 50,000 |
| <u>Community Services</u> | | | | | | |
| CCTV Rationalisation | 2010/11 | 5,000 | SCE | Funded by Prudential Borrowing - Offset against previous scheme underspend returned to balances via 11-12 Outturn report | | 5,000 |
| <u>Development</u> | | | | | | |
| Tatton Park - Office Accommodation Ph 2 | 2010/11 | 715 | SCE | Small overspend on the Tatton Office Accommodation Capital scheme - To be fully funded by a contribution from the Tatton Revenue Budget | | 715 |
| Town Regeneration & Development | 2012/13 | 35,000 | SCE | Fully funded by S106 contribution - Provided by Magus for Macclesfield Town Centre works | | 35,000 |
| Total SCE's Requested | | 945,802 | | | | 945,802 |

| | | | | | | |
|---|---------|------------------|----------|--|---------|------------------|
| <u>CAPITAL BUDGET VIREMENTS</u> | | | | | | |
| <u>Children, Families & Adults</u> | | | | | | |
| Oakefield Primary School - Basic Needs 2011/12 | 2011/12 | 70,000 | Virement | Beechwood Primary School - Basic Needs 11-12 | 2011/12 | 70,000 |
| CareWorks System | 2012/13 | 456,390 | Virement | Combined ICT Project | 2012/13 | 456,390 |
| <u>Places & Organisational Capacity</u> | | | | | | |
| <u>Development</u> | | | | | | |
| Tatton Park - Conservatory | 2009/10 | 4,616 | Virement | AMS Block 12-13 | 2012/13 | 4,616 |
| Asset Management Service Block 2012/13 | 2012/13 | 1,000,000 | Virement | Church Lawton - Specialist Provision | 2011/12 | 1,000,000 |
| Asset Management Service Block 2012/13 | 2012/13 | 343,000 | Virement | Capital Maintenance Grant | 2012/13 | 343,000 |
| <u>Corporate Services</u> | | | | | | |
| <u>ICT</u> | | | | | | |
| Core System Stability | 2012/13 | 63,991 | Virement | Government Connect | 2009/10 | 63,991 |
| Core System Stability | 2012/13 | 44,176 | Virement | Data Centre Macclesfield | 2009/10 | 44,176 |
| Core System Stability | 2012/13 | 191,059 | Virement | Essential Replacement 10-11 | 2010/11 | 191,059 |
| Core System Stability | 2012/13 | 412,429 | Virement | IPT Harmonisation | 2010/11 | 412,429 |
| Core System Stability | 2012/13 | 274,058 | Virement | WAN Hardware | 2011/12 | 274,058 |
| Core System Stability | 2012/13 | 134,881 | Virement | ICT Security 11/12 | 2011/12 | 134,881 |
| Superfast Broadband 12/13 | 2012/13 | 418,324 | Virement | ICT Rural Broadband Project | 2011/12 | 418,324 |
| Local Independent Workforce | 2012/13 | 435,857 | Virement | Information Management | 2008/09 | 435,857 |
| Local Independent Workforce | 2012/13 | 669,831 | Virement | Flexible & Mobile Working | 2009/10 | 669,831 |
| Total Virements Requested | | 4,518,612 | | | | 4,518,612 |
| | | | | | | |
| Total SCE's, Virements and Budget Reductions | | 5,464,414 | | | | 5,464,414 |

Appendix 7 – Corporate Grants Register as at 30th June 2012

| | | Original Budget 2012/13 £000 | Revised Budget 2012/13 £000 | Variance 2012/13 £000 |
|--|---|---------------------------------------|--------------------------------------|-----------------------------|
| Formula Grant | | | | |
| Revenue Support Grant | | 1,287 | 1,287 | 0 |
| National Non Domestic Rates | | 66,390 | 66,390 | 0 |
| Total Formula Grant | | 67,677 | 67,677 | 0 |
| Specific Grants | | | | |
| Ringfenced Grants | | | | |
| Dedicated Schools Grant | 1 | 193,822 | 195,650 | -1,828 |
| Pupil Premium Grant | 1 | 2,696 | 3,944 | -1,248 |
| Sixth Forms Grant (EFA) | 1 | 8,898 | 9,221 | -323 |
| Golden Hello | | 0 | 40 | -40 |
| 16-19 Bursary | | 0 | 83 | -83 |
| Total Ringfenced Grants | | 205,416 | 208,938 | -3,522 |
| Non Ringfenced Grants - held within service | | | | |
| Council Tax Benefit Subsidy | 2 | 20,408 | 20,408 | 0 |
| Housing Benefit Subsidy | 2 | 75,128 | 75,128 | 0 |
| Total Benefit Subsidies | | 95,536 | 95,536 | 0 |
| Non Ringfenced Grants - held corporately | | | | |
| Early Intervention Grant | | 12,908 | 12,908 | 0 |
| Learning Disabilities & Health Reform | 3 | 0 | 6,128 | -6,128 |
| - PCT transfer | | | | |
| Learning Disabilities & Health Reform | | 4,124 | 4,417 | -293 SRE bid |
| Adult Skills & Adult Safeguarding Learning | | 675 | 675 | 0 |
| Skills Funding Agency | | 216 | 216 | 0 |
| YOS grant | | 411 | 418 | -7 |
| NHS Funding | 4 | 3,756 | 3,756 | 0 |
| Troubled Families | | 0 | 522 | -522 SRE bid |
| Troubled Families - Co-ordinator | | 0 | 100 | -100 SRE bid |
| Music Grant | | 0 | 143 | -143 |
| Housing Benefit & Council Tax Admin. | | 2,094 | 2,094 | 0 |
| NNDR Administration Grant | | 519 | 562 | -43 |

Non Ringfenced Grants - held corporately

Local Service Support Grant -

| | | | |
|---|-----|-----|---|
| Preventing Homelessness Grant | 253 | 253 | 0 |
| Lead Local Flood Authorities | 176 | 176 | 0 |
| Community Safety Fund | 148 | 148 | 0 |
| Extended Rights to Free Transport (C&F) | 385 | 385 | 0 |

LSS Total

| | | | |
|---|-------|-------|-------------------|
| Mortgage Rescue / preventing Repossessions | 0 | 107 | -107 SRE bid |
| Community Transport Grant | 0 | 139 | -139 SRE bid |
| Local Sustainable Transport Fund | 0 | 578 | -578 SRE approved |
| New Homes Bonus 2011/12 | 870 | 870 | 0 |
| New Homes Bonus 2012/13 | 1,844 | 1,844 | 0 |
| New Homes Bonus 2013/14 | | | 0 |
| Affordable Homes - starts 2012/13 | 85 | 85 | 0 |
| Council Tax Freeze Grant 12/13 | 4,505 | 4,505 | 0 |
| Council Tax - New Burdens | 0 | 84 | -84 SRE bid |
| Community Rights to Challenge New Burdens grant | 0 | 9 | -9 |
| LACSEG refund from 2011/12 formula grant | 0 | 503 | -503 |
| Children's Workforce in Schools Modernisation Grant | 79 | 0 | 79 |
| Learner Support Funds | 37 | 0 | 37 |
| 16+ Transport Partnership grant | 68 | 0 | 68 |
| Further Education Funding (16-18 Funding) | 9 | 0 | 9 |

Grants Claimed Retrospectively -

| | | | |
|---|-----|----|-----|
| Milk Subsidy | 28 | 28 | 0 |
| Asylum Seeker | 86 | 0 | 86 |
| Workstep | 166 | 0 | 166 |
| Migration Impact Fund (Communities of Interest) | 102 | 0 | 102 |

Total Specific Grants

Total Government Grant Funding

| | Original Budget 2012/13 £000 | Revised Budget 2012/13 £000 | Variance 2012/13 £000 |
|--|---------------------------------------|--------------------------------------|-----------------------------|
| Formula Grant | | | |
| Revenue Support Grant | 1,287 | 1,287 | 0 |
| National Non Domestic Rates | 66,390 | 66,390 | 0 |
| Total Formula Grant | 67,677 | 67,677 | 0 |
| Specific Grants | | | |
| Ringfenced Grants | | | |
| Dedicated Schools Grant | 193,822 | 195,650 | -1,828 |
| Pupil Premium Grant | 2,696 | 3,944 | -1,248 |
| Sixth Forms Grant (EFA) | 8,898 | 9,221 | -323 |
| Golden Hello | 0 | 40 | -40 |
| 16-19 Bursary | 0 | 83 | -83 |
| Total Ringfenced Grants | 205,416 | 208,938 | -3,522 |
| Non Ringfenced Grants - held within service | | | |
| Council Tax Benefit Subsidy | 20,408 | 20,408 | 0 |
| Housing Benefit Subsidy | 75,128 | 75,128 | 0 |
| Total Benefit Subsidies | 95,536 | 95,536 | 0 |
| Non Ringfenced Grants - held corporately | | | |
| Early Intervention Grant | 12,908 | 12,908 | 0 |
| Learning Disabilities & Health Reform | 0 | 6,128 | -6,128 |
| - PCT transfer | | | |
| Learning Disabilities & Health Reform | 4,124 | 4,417 | -293 SRE bid |
| Adult Skills & Adult Safeguarding Learning | 675 | 675 | 0 |
| Skills Funding Agency | 216 | 216 | 0 |
| YOS grant | 411 | 418 | -7 |
| NHS Funding | 3,756 | 3,756 | 0 |
| Troubled Families | 0 | 522 | -522 SRE bid |
| Troubled Families - Co-ordinator | 0 | 100 | -100 SRE bid |
| Music Grant | 0 | 143 | -143 |
| Housing Benefit & Council Tax Admin. | 2,094 | 2,094 | 0 |
| NNDR Administration Grant | 519 | 562 | -43 |
| Total Specific Grants | 334,497 | 346,127 | -11,630 |
| Total Government Grant Funding | 402,174 | 413,804 | -11,630 |

Notes

- 1 The revised budgets for Dedicated Schools Grant, Pupil Premium Grant and Sixth Form Grant (from the Education Funding Agency) figures are based on confirmed allocations, reflecting updated pupil numbers.
- 2 The budgets for Council Tax Benefit and Housing Benefit Subsidy grants are held within the service.
- 3 £6.128m reflects virements arising from change in treatment of funding from PCT contribution to grant
- 4 Spending against NHS Funding grant is to be negotiated with NHS

Appendix 8 – Performance Report

Corporate Scorecard Report for 2012/2013 Quarterly Reporting (Organisation Summary June 2012)

| Objective | Measure | | Frequency | Polarity | Result 2011/12 | Latest Data | | Operational Comments |
|------------------------------|---------|--|-----------|----------|----------------|-------------|-------------|---|
| | Ref | Description | | | | Target | Result | |
| Performance Measures 2012/13 | | | | | | | | |
| | NI 125 | Achieving independence for older people through rehabilitation/ intermediate care | Monthly | High | 74.40% | 74.40% | 78.20% | The new Service Manager for Intermediate Care is currently looking at new and better collection methods to increase response rates. |
| | NI 130 | Social care clients receiving Self Directed Support (Direct Payments and Individual Budgets) | Monthly | High | 45.50% | 39.20% | 39.20% | Initiatives are to be undertaken on this measure to address performance issues. The Team Support Service will work with social work teams to help them drive up performance on this measure and will include coaching sessions with the teams. A similar exercise was undertaken with another measure last year which resulted in |
| | NI 131 | Delayed transfers of care from hospitals | Monthly | None | 8.70 number | Not Set | 9.90 number | Of the main combined NHS/Social Care figure, only 0.1 is attributable to social care. |
| | NI 132 | Timeliness of social care assessment | Monthly | High | 92.80% | 94.00% | 94.00% | This measure continues to perform well. New reporting at team level has been produced so that team managers can now see more detailed breakdowns of |

Corporate Scorecard Report for 2012/2013 Quarterly Reporting
(Organisation Summary June 2012)

| Objective | Measure | | Frequency | Polarity | Result 2011/12 | Latest Data | | Operational Comments |
|------------------------------|---------|--|-----------|----------|----------------|-------------|-------------|---|
| | Ref | Description | | | | Target | Result | |
| Performance Measures 2012/13 | | | | | | | | |
| | NI 133 | Timeliness of social care packages | Monthly | High | 93.80% | 93.00% | 94.40% | Performance remains consistent on this measure. However, there are some missing reviews from the figures, when these are addressed this performance should increase further. A review of this measure is currently being considered: this measure is based on the old national indicator which was created prior to developments around personalisation and programmes such as reablement. |
| | NI 135 | Carers receiving needs assessment or review and a specific carers service, or advice and information | Monthly | High | 35.45% | 17.90% | 17.85% | Performance on this measure has improved on the same point last year (17.9% against 8.45%). There was a significant improvement in 2011/12 but we are still looking at ways to help more carers in 2012/13. For example we are currently exploring ways of improving and increasing the numbers of carers assessments with an organisation that works with carers on behalf of Community Mental Health Teams. |
| | NI 141 | Percentage of vulnerable people achieving independent living | Quarterly | High | 73.45% | 65.00% | Not Updated | First quarter figures are currently unavailable as not enough data has been uploaded to the system to get an accurate result. |

Corporate Scorecard Report for 2012/2013 Quarterly Reporting
(Organisation Summary June 2012)

| Objective | Measure | | Frequency | Polarity | Result 2011/12 | Latest Data | | Operational Comments |
|------------------------------|---------|--|-----------|----------|----------------|-------------|-------------|--|
| | Ref | Description | | | | Target | Result | |
| Performance Measures 2012/13 | | | | | | | | |
| | NI 142 | Percentage of vulnerable people who are supported to maintain independent living | Quarterly | High | 98.43% | 98.70% | Not Updated | First quarter figures are currently unavailable as not enough data has been uploaded to the system to get an accurate result. |
| | NI 145 | Adults with learning disabilities in settled accommodation | Monthly | High | 52.90% | 20.00% | 20.00% | Performance on this measure has improved on the same point last year (20.0% against 14.1%). Although there was significant improvement on this measure in 2011/12, a stretching end year target of 70% has been set. The Team Support Service are currently looking at where there are opportunities to improve performance through better practice or data recording. |
| | NI 146 | Adults with learning disabilities in employment | Monthly | High | 7.00% | 2.53% | 2.53% | Performance on this measure has improved on the same point last year (2.53% against 1.5%). Work is ongoing to help support learning disabled people into work opportunities: for example, we are encouraging Work Placement Officers to further consider the use of assistive technology when arranging in-work support for customers. |

CHESHIRE EAST COUNCIL

REPORT TO: ADULT SOCIAL CARE SCRUTINY COMMITTEE

Date of Meeting: 27 Sept 2012
Report of: Lorraine Butcher, Strategic Director - Children, Families & Adults
Subject/Title: Briefing Paper on the White Paper 'Caring for our future: reforming care and support' (July 2012)
Portfolio Holder: Cllr Janet Clowes

1.0 Report Summary

- 1.1 On 11 July 2010² the Government published its White Paper on the future of Adult Social care in England together with a draft 'Care and Support' bill covering its implementation. This report summarises and analyses the implications of the key proposals contained within the White Paper.

2.0 Decision Requested

- 2.1 To consider the implications of the proposals for the future of Adult social care in Cheshire East

3.0 Reasons for Recommendations

- 3.1 The White Paper contains many proposals, some far-reaching, all of which will have an impact on how we deliver social care within CEC. Although the implementation of all the main proposals is not planned until April 2015 we need to start planning for the changes now and also to acknowledge that there are a number of intermediate initiatives proposed for the intervening period

4.0 Wards Affected

- 4.1 All

5.0 Local Ward Members

- 5.1 All

6.0 Policy Implications including - Carbon reduction - Health

- 6.1 The White Paper contains several new policy proposals together with the imposition of new duties on local authorities. Since the paper is currently subject to public consultation and scrutiny these cannot be confirmed as actual

at the present time – however the key points are highlighted in section 10 onwards

7.0 Financial Implications (Director of Finance and Business Services)

Until the proposals are confirmed it will not be possible to quantify precisely the financial implications for the council. However there are a number of general comments to make:

- 7.1 The government will transfer £300m from the NHS to councils from 2013-15 to implement measures in the White Paper that carry a cost and to further develop integrated services with the NHS. This supplements about £2.7bn in funding transfers from the NHS to councils for social care from 2011-15.
- 7.2 The King's Fund has calculated that a funding gap of £1.2bn a year could open up between 2011-15 due to the government's 28% real terms cuts to council budgets over this period. Councils have already taken almost £2bn out of social care budgets since 2011 - mostly through efficiency savings - and have warned that services will be cut without additional resources
- 7.3 The paper does not make any proposals for an increase in funding for social care although it does acknowledge the increasing demands placed upon the system by our growing and ageing population. The vision of moving towards a more person-centred system within a reducing cost-envelope will require a major shift in public expectations
- 7.4 We are already experiencing locally the pressures of our ageing population. This is compounded by increasing complexity of need as medical advances support those with more profound disability to live longer. Such pressures are already stretching budgets to unprecedented levels meaning that we are starting this implementation from an already challenging position
- 7.5 The paper deferred any decision on the introduction of the Dilnot proposals capping personal lifetime expenditure on care, although Government did commit itself to supporting the principles Dilnot outlined. However on Aug 16th the Government reversed this position and confirmed that an announcement is due this autumn, with the Dilnot proposals inserted into the draft Care and Support Bill, and the precise funding solution will be unveiled in the 2014 spending review
- 7.6 It is not totally clear how many of the proposals will become mandatory or will remain discretionary, however the items that are likely to impose an extra cost burden include:
 - The recruitment of 'Principal Social Workers'
 - The obligation to provide services to carers
 - The loss of income resulting from the provision that payments from the Armed Forces Compensation Scheme will, from October 2012, not be required to be used to pay for social care arranged by the public sector
 - Increased safeguarding obligations
 - Retraining for social care staff

- A new statutory duty to offer deferred payment agreements for social care charges

- 7.7 Community Care Magazine has produced some cost analysis extracted from the Equality Impact Assessments accompanying the paper. These are national figures, based on a number of assumptions with caveats so should be treated with caution:
- Social workers will save 20-45 minutes a week in administration from the reforms to social care law in the draft Care and Support Bill, a saving equivalent to £12.4m in financial terms
 - Social workers will need six days' training over two years in the new legal framework introduced through the draft bill at a cost of £6.3m in direct training costs and £37m in knock-on costs from removing practitioners from the front line
 - The cost of a full community care assessment is £450 in terms of staff time
 - The most costly reform in the draft bill would be providing carers with a right to assessment if they appear to need support and a right to support if they meet eligibility thresholds, with the bill for this rising to an additional £175m a year by 2019-20, £25m in assessment costs and £150m in support costs
 - Putting adult safeguarding on a statutory footing will cost an additional £8.4m a year - £2.4m from the duty on councils to conduct enquiries in suspected abuse/neglect cases and £6m from making safeguarding adult boards mandatory in every area and holding safeguarding adult reviews in serious cases.

8.0 Legal Implications (Authorised by the Borough Solicitor)

- 8.1 The White Paper contains several new proposals for statutory changes to adult social care which if enacted will impose additional duties on Local Authorities. Since the paper is currently subject to public consultation and House of Lords and Committee scrutiny these cannot be confirmed as actual at the present time – however the key points are highlighted in section 10
- 8.2 It is not clear how many of the proposals will become mandatory and how many will remain discretionary. If the new Act imposes mandatory duties on Local Authorities there will be no additional duty on those authorities to consult prior to implementing changes, however if some of the duties have a discretionary element then the Local Authority will need to consult and undertake Equality Impact Assessments before implementing policy change.
- 8.3 The new Care and Support Act is intended to be a consolidating Act and should it receive Royal Assent it is likely that various sections of the pre-existing statutes will be repealed. Staff will need to be retrained in order to be able to recognise these changes and Local Authority documentation amended to reflect those changes.
- 8.4 Overall the proposals in the new Adult Social Care Bill are positive and have been well received.

- 8.5 The White Paper acknowledges that the current legal framework for social care is opaque, complex and anachronistic. This being further compounded by the fact that the majority of the Personalisation Agenda was introduced via policy documents rather than by statute and with only the minority of those policies having statutory force. This led to confusion and inconsistency in the provision of adult social care. It accepts the majority of the Law Commission's recommendations and proposes rationalising the legislation into one single statute. This should have significant benefits for the Council in reducing future legal challenges particularly in relation to ordinary residence disputes and providing for the development of clearer operational guidance for staff

9.0 Risk Management

- 9.1 To be developed as the proposals are confirmed

10.0 Key Points and Timescales

- 10.1 The key actions which the Government has identified are listed below. The paper states that the Government will work with partners - including carers; people who use services; local authorities; care providers and the voluntary sector – to take the following actions:
- Stimulating the development of initiatives that help people share their time, talents and skills with others in their community.
 - Developing and implementing, in a number of trailblazer areas, new ways of investing in supporting people to stay active and independent, such as Social Impact Bonds.
 - Establishing a new capital fund, worth £200 million over five years, to support the development of specialised housing for older and disabled people.
 - Establishing a new national information website, to provide a clear and reliable source of information on care and support, and investing £32.5 million in better local online services.
 - Introducing a national minimum eligibility threshold to ensure greater national consistency in access to care and support, and ensuring that no-one's care is interrupted if they move.
 - Extending the right to an assessment to more carers, and introducing a clear entitlement to support to help them maintain their own health and wellbeing.
 - Working with a range of organisations to develop comparison websites that make it easy for people to give feedback and compare the quality of care providers.
 - Ruling out crude 'contracting by the minute', which can undermine dignity and choice for those who use care and support.

- Consulting on further steps to ensure service continuity for people using care and support, should a provider go out of business.
- Placing dignity and respect at the heart of a new code of conduct and minimum training standards for care workers.
- Training more care workers to deliver high-quality care, including an ambition to double the number of care apprenticeships to 100,000 by 2017.
- Appointing a Chief Social Worker by the end of 2012.
- Legislating to give people an entitlement to a personal budget.
- Improving access to independent advice to help people eligible for financial support from their local authority to develop their care and support plan.
- Developing, in a small number of areas, the use of direct payments for people who have chosen to live in residential care, to test the costs and benefits.
- Investing a further £100 million in 2013/14 and £200 million in 2014/15 in joint funding between the NHS and social care to support better integrated care and support.

10.2 Appendix 1 gives more detailed chapter-by-chapter extracts of all the proposals. It also highlights those which are likely to have greatest impact in CEC

10.3 The paper indicates the following implementation timeline

| | |
|-----------|---|
| Jun 12 | 2012/13 Health and Social Care Volunteering Fund (local scheme) invites bids to support community-based support, including time-banking schemes. |
| Jul 12 | First stage of the provider quality profile goes live on the NHS and Social Care Information website. |
| Jul 12 | Publication of the draft Care and Support Bill, setting out how we plan to reform care and support law. The draft Bill will be subject to pre-legislative scrutiny. |
| Summer 12 | Expressions of interest invited to pilot direct payments in residential care. |
| Autumn 12 | Consultation on oversight of the care market published. |
| Autumn 12 | Further details about the process for establishing Social Impact Bond trailblazers published. |
| Sept 12 | Code of conduct and minimum training standards for care workers published. |
| Oct 12 | Further details about the £200 million capital fund for older and disabled people's housing published. |
| Oct 12 | 2013/14 Adult Social Care Outcomes Framework published. |
| Winter 12 | Publication of an integration plan, setting out how the modernisation of the NHS can be built upon to provide a more joined-up experience for people. |
| Winter 12 | Chief Social Worker appointed. |
| Winter 12 | 2013/14 Health and Social Volunteering Fund (national scheme) invites bids to support community-based support, including time-banking schemes. |
| Mar 13 | Working group established to develop and test options for a new assessment and eligibility framework for people who use services and for carers. |
| Mar 13 | Launch of the Leadership Development Forum. |

| | |
|-----------|---|
| Spring 13 | Social Impact Bond trailblazers launched, to encourage investment in innovative support to keep people independent at home. |
| Apr 13 | NHS Commissioning Board, clinical commissioning groups, Public Health England, health and wellbeing boards, and local authorities take on their new statutory responsibilities as set out in the Health and Social Care Act 2012. |
| Apr 13 | Additional funding for integrated care and support made available to local authorities through the NHS Commissioning Board. |
| Apr 13 | Improved information added to the provider quality profile, and the data made available to organisations to develop a quality rating. |
| Apr 13 | NICE begins the development of a library of quality standards for care and support, including standards for the quality of home care. |
| Apr 13 | Residential care charging rules changed, so that the income that people earn in employment is exempt from charges. |
| Winter 13 | Care and support sector compact published. |
| Apr 15 | Introduction of new funding system for end-of-life care. |
| Apr 15 | National minimum eligibility threshold for adult social care introduced |

11.0 Analysis and Comment

- 11.1 Much of what the paper espouses in terms of principles and good practice is not new and is already being actively pursued and developed by CEC and other authorities
- 11.2 In view of the number and costs of recent legal challenges faced by the Council the legislative reform is to be welcomed. However the repeals proposed in the supporting bill do not entirely rescind all previous legislation but simply sections of some statutes. It is to be hoped that nothing is omitted from the repeals list that could conflict and confuse the new legislation leaving us in a no better position and potentially subject to the development of a whole new set of case law
- 11.3 The proposals to abolish 'contracting by the minute' will pose significant issues for our commissioning regime and provider relationships. It will also demand a revision of our current methods for calculating the nominal value of a Personal Budget
- 11.4 The proposal to outsource social care assessments, potentially to social enterprises established by social workers, could deplete the pool of staff employed by CEC. This will make it more difficult to embody the flexibility to respond to the increased safeguarding responsibilities that LAs are due to bear
- 11.5 The paper has been broadly welcomed by the sector (with the exception of the omission of a funding solution); ADASS and Age UK amongst those bodies responding positively (see appendices)
- 11.6 'Community Care' has published a range of comment and articles – extracts include:

“The biggest impact is likely to be felt from the proposal for councils to outsource assessments to multiple providers in each area, giving service users choice over who assesses their social care needs. The government has speculated this could include social workers setting up their own social enterprises to deliver this service, along the lines of the existing social work practice pilots. However, it could also mean private equity firms making profits out of assessment and a drop in quality and consistency, according to organisations representing social workers. Unison's national officer for social work, Helga Pile, says it is deeply concerned at the lack of an evidence base for such a move, given its potential to undermine other elements of the White Paper, such as the establishment of a national minimum eligibility threshold for care to promote consistency.” Joe Godden, professional officer for the British Association of Social Workers (BASW) is not directly opposed to the idea of outsourcing assessments, pointing out that other countries operate a model of assessment that is not part of local government. But he is concerned about quality assurance, the qualifications of those doing assessments and levels of funding. Social workers should, the White Paper states, help to connect people to community networks, get them involved in local activities and create community groups where there are currently gaps...But Godden warns that a community development role may have to be independent of an assessment role. “There can be conflicts and the loss of credibility within your community if you are also doing assessments. You could have the one organisation providing both services but I’m not sure you can have the one social worker doing both.”

.....

“Social workers' ability to influence local authorities' direction could be helped by the third main change for social workers contained within the White Paper - the appointment of principal social workers for adult services within councils. While children's services are already grappling with what such a role entails in practice, Chris Russell of the College of Social Work believes an adult version should focus on forging partnerships between upper management and frontline staff and key people in partnership organisations. However, Dee Kemp, practitioner manager at Topaz, the social work practice pilot in Lambeth, believes the key role of a principal social worker should be about advising and supporting social workers to develop. “It is essential that social workers are encouraged to continue developing throughout their careers.”

12.0 Appendices

Appendix 1 – Detailed extracts of White Paper proposals



Summary of White
Paper proposals.doc

ADASS Statement:



Microsoft Office
Word 97 - 2003 Docu

Summary of Age UK response:



Microsoft Office
Word 97 - 2003 Docu

Government factsheets explaining key points from the Bill:



Care-and-Support-Bil Care-and-Support-Bil Care-and-Support-Bil Care-and-Support-Bil 2900021-Fact-sheet-
I-Factsheet-1-Assessil-Factsheet-2-Chargirl-Factsheet-3-Who-is-I-Factsheet-4-Care-a 5-v1_1W-21.pdf



Care-and-Support-Bil Care-and-Support-Bil Care-and-Support-Bil
I-Factsheet-6-ProtectI-Factsheet-7-Health-I-Factsheet-8-Health-

13.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

Name: Lorraine Butcher

Designation: Strategic Director - Children, Families & Adults

Tel No: 01270 686021

Email: Lorraine.Butcher@cheshireast.gov.uk

Summary of the White Paper - Caring for our future: reforming care and support'

In this report we follow the broad structure of the white paper and provide summary extracts and lists of the key proposals (and sub-proposals) within each of the main chapters. The proposals likely to have the biggest impact for CEC are highlighted

1. Introductory Chapters

The paper acknowledges that 'Our system of care and support, developed in a piecemeal fashion over more than six decades, is broken and in desperate need for reform'

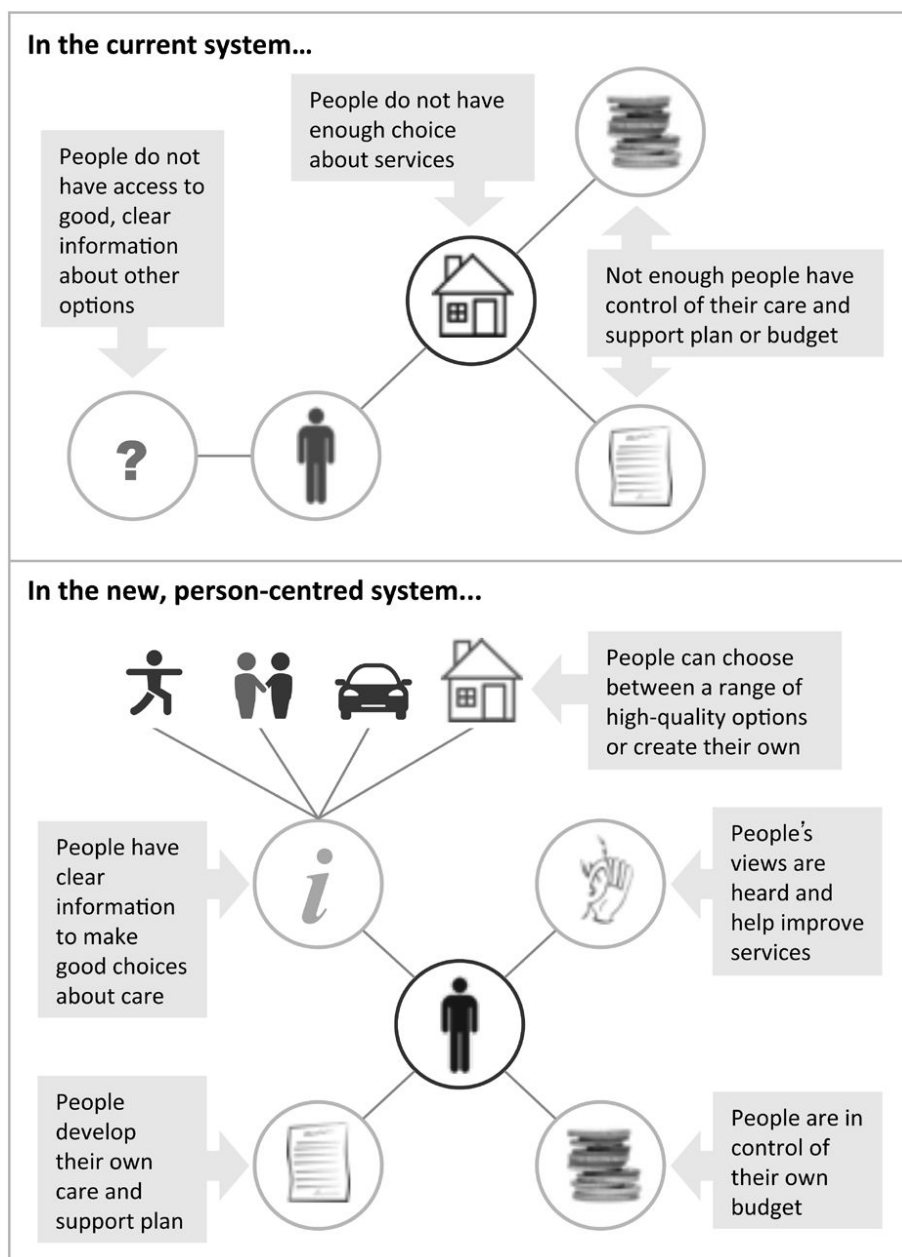
Two core principles lie at the heart of this White Paper. The first is that we should do everything we can – as individuals, as communities and as a Government – to prevent, postpone and minimise people's need for formal care and support. The system should be built around the simple notion of promoting people's independence and wellbeing.

The second principle is that people should be in control of their own care and support. Things like personal budgets and direct payments, backed by clear, comparable information and advice, will empower individuals and their carers to make the choices that are right for them

The Reasons for Reform

- Too often the system only reacts to a crisis;
- Society is not making the most of the skills and talents that communities have to offer;
- People do not have access to good information and advice;
- Access to care varies across the country and is confusing;
- Carers have no clear entitlement to support;
- Not all care is good. The quality of care is variable and inconsistent;
- People often feel 'bounced around' and have to fight the system to have the joined-up health, care and support they need;
- Our growing and ageing population is only going to increase the pressures on the current system.

The Vision



2. **“I am supported to maintain my independence for as long as possible”**
 Care and support will be transformed to focus on people’s skills and talents, helping them to develop and maintain connections to friends and family. Communities will be encouraged and supported to reach out to those at risk of isolation and people will be able to access support, including better housing options that help to keep them active and independent.

Proposals to:

- create shared measures of wellbeing across the 2013/14 editions of both the Public Health and Adult Social Care Outcomes Frameworks, with a particular focus on developing suitable measures of social isolation;

- b) legislate to introduce a clear duty on local authorities to incorporate preventive practice and early intervention into care commissioning and planning;
- c) involve communities in decisions around health and care services, through local Healthwatch and health and wellbeing boards;
- d) support social workers to connect people at risk of isolation to community groups and networks, using evidence from the Social Work Practice Pilots;
 - *The Social Work Practice Pilots aim to liberate social workers from case management, allowing them to focus on promoting active and inclusive communities, and empowering people to make their own decisions about their care.*
- e) support *My Home Life* and national care provider organisations to work with their members to develop 'open care homes' that build links with their local community; stimulate the development of time banks, time credits and other approaches that help people share their time, talents and skills with others in their community; develop, in a number of trailblazer areas, new ways of investing in supporting people to stay active and independent, such as Social Impact Bonds;
 - *Social Impact Bonds are a way of attracting investment to provide up-front funding for the development of new and innovative services. Social investors weigh the social and financial returns they expect from an investment in different ways. They will often accept lower financial returns in order to generate greater social impact. We will explore whether Social Impact Bonds can be used in care and support to help people live independent lives. As a type of 'payment by results' tool, the Bonds ensure that taxpayer funding is used only if services are successful. Further details about the process for establishing the trailblazers will be published in autumn 2012.*
- f) to establish a care and support evidence library to act as a bank of best practice in prevention and early intervention;
- g) establish a new care and support housing fund, worth £200 million over five years, to support the development of specialised housing for older and disabled people;
- h) work with Home Improvement Agencies to extend their services to more people who fund their own adaptations and ensure that people obtain timely support and advice.....
 - *We will take forward the Three Million Lives campaign, launched in December 2011, which will accelerate the roll-out of telehealth and telecare in the NHS and social care during a five-year programme to develop the market. This is being supported by an investment of up to £18 million over four years by the Technology Strategy Board, to demonstrate how assistive technology can be delivered on a at greater scale. We will set out the incentives and support for widespread adoption of assistive technology later this year.*

3. "I understand how care and support works, and what my entitlements and responsibilities are"

Better national and local information will help people to understand the options available to them and help them to plan and prepare for their care and support. Greater consistency in access will give people the confidence to move around the country. Major new entitlements for carers will mean that they are better supported to carry out their caring role and to maintain their own health and wellbeing.

Proposals to:

- a) Establish a new national information website to provide a clear and reliable source of information on care and support;

- b) Support local authorities to develop new online services that provide people with more consistent and more easily accessible information about their local care and support options, with start-up funding of £32.5 million;
- *The Government will legislate to ensure that local authorities provide a comprehensive information and advice service*
 - *We will legislate to ensure that people get information on how the care and support system works locally and how people can access care and support, regardless of whether they are entitled to any state-funded support towards the costs of their care.*
 - *We expect to see all local authorities radically improving their online information and support services*
- c) Introduce greater national consistency in access to care and support, through a national minimum eligibility threshold;
- *Once implemented, local authorities will be free to set their eligibility threshold at a more generous level, but will not be able to tighten beyond the new national minimum threshold.*
 - *Given the commitment to a national threshold, and the funding in this Spending Review, there should be no need for local authorities to tighten current eligibility thresholds.*
- d) Remove the barriers that keep people from moving to a new home in a different Local authority area, by ensuring no-one's care and support is interrupted;
- *We will legislate to require local authorities to continue to meet the assessed needs of people who have moved into their area immediately, until they carry out a new assessment of their own.*
 - *The draft Care and Support Bill also sets out new duties on the local authorities involved to share information to encourage a smoother transition. This will include the ability for people to request an assessment before they move home.*
- e) Require NHS organisations to work with their local authority partners and local Carers organisations to agree plans and budgets for identifying and supporting carers;
- f) Work with the employers for carers forum to produce and publish a road map Setting out action to support carers to remain in the workforce;
- g) Transform support for carers by extending the right to an assessment, and introduce a new entitlement to support for them to maintain their health and wellbeing.
- *We want people to have choice and control over who carries out their assessment. The Social Work Practice Pilots programme is already supporting new providers, including social enterprises and the independent sector, to offer assessment and care management, so that people have more choice over this important aspect of their care and support*
 - *The Government expects the NHS to work with its local authority partners and local carers' organisations to agree plans for identifying and supporting carers, and to publish them by 30 September 2012.*
 - *From April 2013 the NHS Commissioning Board and clinical commissioning groups will be responsible for working with local partners to ensure that carers are identified and supported*
 - *We will set a national minimum eligibility threshold for support for carers, just as we will for people who use services.... there will be a duty on local authorities to provide support to carers, which will be equivalent to that for people who use services.*

Note: Recognising armed forces veterans

In recognition of the contribution made by armed forces personnel injured whilst on active service the Guaranteed Income Payments made under the

Armed Forces Compensation Scheme will, from October 2012, not be required to be used to pay for social care arranged by the public sector.

4. “I am happy with the quality of my care and support”

People will be empowered to make decisions about their own care and support due to radical improvements to information on the options available to them. People using care and support will be listened to, and local authorities and care providers will be able to respond more effectively to what people want and the concerns they have. This will drive improvements to the quality of care and support so that people are confident that it will be of a high standard.

Proposals to:

- a) Set out clearly what good-quality care looks like and what people should expect when using care and support;
- b) Ban age discrimination in health, care and support from October 2012;
- c) Give people access, from today, to clear information about the quality of Individual care providers;
 - *From today, every registered residential or home care provider will have a provider quality profile on the NHS and social care information website at www.nhs.uk.*
 - *Within 12 months, the Government will enable open access to the data on the provider quality profile, to support the production of independent quality ratings that are easy to understand and continually updated.*
 - *To promote better transparency the Ombudsman is committed to publishing data on complaints, and how these were resolved, by 2013*
 - *The Government is also establishing new local Healthwatch organisations from April 2013. Local Healthwatch will be the local consumer champion for social care and health. Volunteers will have an important role to play in carrying out the functions of local Healthwatch including, for example, visiting care homes. We expect that local Healthwatch organisations will make active use of their power of entry, allowing them to visit any care services in their local area*
- d) Work with a range of organisations to develop comparison websites that make it easy for people who use services, their families and carers to give feedback and compare the quality of care providers;
- e) Refer home care to the National Institute for Clinical Excellence as the topic for a quality standard, as part of a library of care and support quality standards to be developed from April 2013;
- f) Pilot a new care audit in 2013 to highlight how well residential care providers are delivering dementia care, encouraging them all to improve their care;
- g) Put action to protect people from abuse and neglect on a statutory footing, with clear duties on local authorities, the police and the NHS to work together to keep people safe;
 - *Local authorities, as the lead organisations, will have a responsibility for convening a statutory Safeguarding Adults Board, with core membership from police and NHS Organisations*
 - *Local authorities will be clearly empowered to make safeguarding enquiries, and Boards will also have a responsibility to carry out safeguarding adults reviews.*
 - *Consult specifically on whether a new power should be created for local authorities to access and see a person who may be at risk of abuse or neglect, in cases where the local authority may not otherwise be able to carry out a safeguarding enquiry*
- h) Rule out crude ‘contracting by the minute’, which can undermine dignity and choice for those who use care and support;

- i) Consult on further steps to ensure service continuity for people using care and support should a provider go out of business.
 - *Local authorities have a duty to provide accommodation to anyone – publicly or self-funded – who has an urgent need for care which is not otherwise available*

Additional Notes:

The Government will introduce a duty upon local authorities to promote diversity and quality in the provision of services.

We are offering support to every local authority to create a market position statement or to develop their existing one

5. “I know that the person giving me care and support will treat me with dignity and respect”

People’s experience of care and support depends heavily on the sensitivity and compassion of the care workers who work with them. By setting out clear minimum training standards, recruiting more apprentices and supporting the transformation of the social work profession, we will ensure that people are confident that they will be able to develop trusting and rewarding relationships with those giving them care and support.

Proposals to:

- a) Place dignity and respect at the heart of a new code of conduct and national minimum training standards for care workers;
 - *In addition, we will work with care providers, service users and carers to develop a sector-specific compact, including a skills pledge, to promote culture change and skills development. This will set a framework for agreement between employees and employers to improve skills, competencies and behaviours. As part of this work we would expect local authorities and care providers to identify the appropriate proportion of available resources to support training and development as part of the commissioning process. The compact will be published by the end of 2013.*
- b) Offer personal assistants (PAs), and their employers, greater support and training to improve recruitment, retention and the quality of the care and support they deliver;
- c) **Focus the role of social workers on interpersonal support, to promote choice and control, and to better meet people’s needs and goals;**
 - *The Government remains committed to supporting the social work reform programme developed by the Social Work Reform Board.*
- d) Appoint a chief social worker by the end of 2012, to provide a leadership role for the social work profession and to drive forward social work reform;
 - *We support the Munro Review recommendation for the appointment of Principal Social Workers for Children’s Services in each local authority. We also support the development of an equivalent role in adult services. Principal Social Workers should be responsible for quality assuring the safety of practice, and facilitating feedback between front line staff, management and the Chief Social Worker.*
- e) Train more care workers to deliver high-quality care, including an ambition to double the number of care apprenticeships to 100,000 by 2017;
- f) Expand the care ambassadors scheme to promote a positive image of the sector, making links with schools, colleges, and careers and job services;
- g) Establish a new leadership forum, to develop the leadership skills and abilities of people at every level of care and support; and strengthen the status of registered managers as critical leaders and advocates for quality care.

6. “I am in control of my care and support”

People will have control of their own care and support, so they can make decisions about the options available. We will give people an entitlement to a personal budget, and will strengthen our ambitions on direct payments. Care and support will focus on meeting people’s individual needs and helping them to achieve their aspirations. People will not have to fight against the system: health, housing and care services will join up around them.

Proposals to:

- a) Legislate to give people an entitlement to a personal budget as part of their care and support plan, and will strengthen our ambitions on direct payments;
 - *Our goal remains that everyone who is eligible for ongoing non-residential care should have a personal budget, preferably as a direct payment, by April 2013. We expect local authorities to meet that goal*
- b) Improve access to independent advice and support to help people who are eligible for support from their local authority to develop their care and support plan and to choose how their needs could be met;
 - *This will require local authorities to develop and commission a range of independent advice and support options*
 - *We also want local authorities to help people who are funding their own care and support to make choices, plan and arrange services. The draft Care and Support Bill sets out our plans to enable everyone to request the assistance of their local authority with the development of a care and support plan for their eligible needs. This will be part of the local authority’s offer to everyone in its area with care and support needs. It would be subject to a reasonable charge for those who can afford it.*
- c) Develop, in a small number of areas, the introduction of direct payments for people who have chosen to live in residential care, in order to test the costs and benefits (Expressions of interest will be invited shortly)
- d) Change the charging system for residential care from April 2013, so that the income that people earn in employment is exempt from residential care charges;
- e) Invest a further £100 million in 2013/14 and £200 million in 2014/15 through joint funding between the NHS and social care to support better integrated health and care services;
 - *The draft Care and Support Bill also sets out a duty on the local authority to promote the integration of services, along similar lines to the duty on the local NHS already enacted by the 2012 Act. In addition, the draft Bill will provide for further duties of co-operation which encourage local partners to work together to improve the wellbeing of local people.*
 - *Personal health budgets are currently being piloted in the NHS in England. A personal health budget is an amount of money that is allocated from the NHS to an individual, with a care plan, to allow them to meet their health and wellbeing needs in a way that best suits them. As personal health budgets are extended beyond the pilot sites, subject to the current evaluation, we will make it straightforward for people to combine them with personal social care budgets so that they can make the most of the support to which they are entitled.*
- f) Place a duty on local authorities to join up care and support with health and housing where this delivers better care and promotes people’s wellbeing;
 - *We will publish a Social Care Leadership Qualities Framework in summer 2012 to complement the existing NHS Leadership Framework*
- g) Develop plans to ensure that everyone who has a care plan has a named professional with an overview of their case and responsibility for answering any questions they might have;

- h) Work with partners to remove barriers and promote the widespread adoption of Integrated care;
- i) Develop models of coordinated care for older people;
 - *Good re-ablement, intermediate care and post-discharge support means that older people returning home after a stay in hospital should have a temporary support plan that helps them to regain their independence and ensures they are not pressurised into a decision about long-term support which is not right for them.*
- j) Improve the access that people living in care homes have to a full range of primary and community health services.

Note re transitions:

Moving from children's to adults' services, at age 18, is a key transition point. The Government's Green Paper *Support and aspiration: a new approach to special educational needs and disability* sets out plans to develop a new birth to- age-25 assessment process and a single plan incorporating education, health and social care assessments. The Green Paper also sets out our plans to introduce personal budgets for families with an education, health and care plan from 2014. In addition, we will legislate to give adult social care services a power to assess young people under the age of 18.

7. Delivering the vision

- a) The draft Care and Support Bill will clearly set out the role of local authorities in a modern care and support system. It will reflect a reformed system in which people's needs, goals and aspirations are central to the way that care and support operates, and people have choice and control over how these are met.

Increasingly, the role of local authorities will no longer centre on the purchasing and provision of care and support. Instead, authorities will be expected to take a leadership role: identifying the needs of the local population, supporting the informal and community networks that can help people stay independent, and ensuring that people have a diverse and responsive choice of options.
- b) We will launch a new Care and Support Transformation Group, which will act as an important forum for challenge and peer support. The group will be made up of local authorities, care providers, the voluntary sector, people who use services and carers. We expect the group will challenge all those taking forward the White Paper to stretch our collective ambitions:
- c) We will also create a Care and Support Implementation Board, which will have ownership of the implementation plan, with members of the board assuring on the delivery of specific milestones. The implementation board will bring together the organisations that have lead responsibility for key outputs from this White Paper.

ADASS RESPONSE

Today's announcement of the Social Care White Paper and draft Bill has successfully set out a compelling vision for care and support in the 21st century. Its concentration on citizens, carers, prevention, personalisation and integration points to the very best practice that some of our members are already implementing. The way in which the Bill draws on the Law Commission's recommendations for a simpler basis for social care law provides important steps towards a better future for all," according to ADASS President Sarah Pickup.

The emphasis of a future for social care which puts entitlement, individual choice and control at the heart of delivery and legal reform supports the direction of travel we have been championing. The strengthened commitment to ensure transparent reporting of the quality of provision, combined with additional training and support for the workforce, will assist in our joint endeavours to establish excellence as the norm across the sector.

She added: "whilst fully supporting the aspirations set out, we are concerned our arguments on resourcing have not been accepted. We now face an uncertain funding picture until 2015. We are concerned that as Local Authority budgets are squeezed further, the preventative services the Bill seeks to promote may be some of the first casualties of council savings plans. The ADASS budget survey has shown that good progress has been made on making savings against tight Local Government settlements. Whilst the majority of this has been achieved through service redesign and efficiency, 20% has required service reductions. Even within the efficiencies is a hidden pressure on prices paid to providers of services. Whilst providers must play their role in delivering savings, we can not sustain a position where inflationary pressures faced by providers go unfunded. Our concern is the potential impact on the availability of services for individuals before a longer term solution is found."

Mrs Pickup went on to warn "that the proposals brought forward today, however measured and helpful, cannot compensate for the absence of a fundamental resourcing solution which will need to sit alongside new ways of working with the NHS through joint commissioning and service reform.

We understand why this has to be positioned into the Comprehensive Spending Review but we do not understand why once again, Social Care has not achieved the national priority it deserves and remains at the back of the funding queue. We regret opportunities to use NHS underspends have not been taken and that funding has been found for other priorities such as weekly bin collection, without the need to wait for a spending review."

The policy and legal framework in the White Paper and Bill reflect that the Government has listened to the many voices in the sector calling for reform. For example, the proposals to fully recognise the needs of carers in their own right are a momentous step forward. ADASS is keen to assist the Government deliver on its ambitious agenda and hopes now to be able to work with Ministers and other stakeholders to achieve the settlement we need. These latest publications move us substantially forward; we must now work together to put the final pieces in place. There are no easy answers but we owe it to citizens to finish what we've started.

This page is intentionally left blank

Age UK - Key points summary & response

Key points:

- **Long term funding reform.** The Government has indicated its support for the principles of the approach recommended by the Dilnot Commission – a cap on lifetime contributions and an increase to the means test threshold. However, no clear commitments have been made on implementation. Instead the Government has stated it, *'will work with stakeholders and the official opposition to consider various options for what shape a reformed system should take, based on the principles of the Commission's model, before coming to a final view in the next spending review'*.

Nor has the Government committed extra funds to address levels of unmet need or to close the current gap in funding (which we estimate is around £500m in 2011-12).

While we recognise that the Government's commitment to the Dilnot approach is an important milestone we are concerned that, with no clear plan for how they intend to deliver on this commitment, there are no guarantees that the proposals will be put into action soon, or possibly at all. Care reform and funding reform must go hand in hand to be really meaningful and failing to address the funding question risks undermining the whole system.

- Government has published its **response to the Law Commission review of adult social care** and, based on this response, **the draft Care and Support Bill**. The intention is to consult on this draft before putting a Bill before Parliament in the next session.

The draft Bill is largely based on the Law Commission's recommendations, which Age UK strongly supports. It retains and clarifies most of the current rights of older and disabled people and adds important new legislation, including rights to services for carers, and legislation to safeguard adults at risk of abuse.

- **Introduction of a new eligibility criteria and a national eligibility threshold.** These will be developed alongside a new assessment system to replace the existing Fair Access to Care Services.

Age UK welcomes the commitment to introduce a national threshold, signalling an end to the unfair postcode lottery. We have called on Government to ensure a new threshold is set at a decent minimum level (we believe this should be moderate or its equivalent in the new system) and that eligibility criteria are based on outcomes social care should achieve.

- **Measures to improved information and advice** at a local and national level. The Government has committed to setting up a single national online portal for information about health and care, and investing £32m in the development of local authority websites providing local information about care and support services.

Improved access to information and advice is a positive step forwards. However, we are concerned by the White Paper's emphasis on online tools. Information and advice needs to be accessible to all those who need it and in a range of formats.

- Age UK has welcomed measures to **enhance coordination of care and promote between local authorities, health and housing services**. These will be underpinned by new legal duties on local authorities to promote integration and additional investment in integrated and coordinated care models.

- Local authorities will have a new duty to incorporate **preventative practice and early intervention** into care commissioning and planning. Commissioners and providers will be supported by a new national care and support evidence library.

We hope this signals a shift in focus from crisis intervention to prevention and early intervention. Supporting people to manage their needs at an earlier stage can reduce demand on the more intensive health and care services, as well as improving quality of life and maintaining independence and wellbeing.

- Government has reiterated its commitment to **personalised services** as the underlying principle shaping the provision of care services. This will be underpinned by: a new entitlement to a personal budget; a right to request a direct payment; and new duties on local authorities to promote diversity and quality in the provision of services and to provide

access to independent advice and support for people eligible for local authority funded support.

Age UK is pleased that personalisation remains a guiding principle for the care and support system. Improving the quality of managed personal budgets is particularly important for older people who do not choose a cash payment for their care. However, it remains vital that personalisation is seen in broader terms than simply rolling out personal budgets and direct payments.

- We are pleased that the importance of housing has been recognised in the White Paper through **improved access to housing aids and adaptations**, as well as **availability of extra care and sheltered housing**. In particular, we welcome measures to develop a greater variety of housing options, as well as allocate more support to ensure existing housing is suitable.

- Introduction of new **national minimum standards for workforce training** and a new **code of conduct both emphasising dignity and respect**. The White Paper also announces a new Chief Social Worker role and improved support for development of leaders in the sector.

Age UK has welcomed the reforms to workforce and training. Through the Dignity in Care Commission we called for a review of the pay, status, training and regulation of care workers. We hope that Government intends to implement these proposals as part of a wider look at staffing in the care sector.

- Age UK has welcomed long overdue improvements to carers rights. There will be **increased legal rights for carers to both assessment and services**, significantly strengthening their entitlements to support.

CHESHIRE EAST COUNCIL

REPORT TO: ADULT SOCIAL CARE SCRUTINY COMMITTEE

Date of Meeting: 27 Sept 2012
Report of: Dominic Oakeshott
Subject/Title: Adult Social Care Financial Systems – The Vision and Future Direction
Portfolio Holder: Cllr Janet Clowes

1.0 Report Summary

- 1.1 The financial arrangements supporting the Adults Social Care Department are complex with a range of payment and charging arrangements, including Empower, traditional Direct Payments, directly commissioned services and internal provision. The arrangements rely on a variety of IT systems and processes, including PARIS, CRRIS and the Empower platform operated via LA2Plus and Citibank.
- 1.2 The supporting IT and banking systems are no longer considered viable due to a range of issues including obsolescence, lack of robust interfaces and insufficient error-trapping and audit trail production
- 1.3 This report outlines the future vision for our social care 'offer' to customers together with detailing the proposals for the specification and procurement of new IT systems to support this vision
- 1.4 In summary the new products proposed are:
 - A replacement customer record system
 - A new contract management system
 - A new banking product

2.0 Decision Requested

- 2.1 To note the reasons justifying the need to purchase new systems
- 2.2 To acknowledge and support the vision for commissioning, delivery and payment of Adult social care
- 2.3 To request a further progress report within 6 months

3.0 Reasons for Recommendations

- 3.1 The growth of Direct Payments as a result of the continuing government drive towards personalisation has placed complex burdens on our existing systems

and processes which were previously designed to manage internally delivered or directly contracted services only

- 3.2 The problems and issues exposed by the introduction of the Empower card mean that, without streamlined systems and processes, we will continue to run the risk of poor financial management, duplicated manual effort and poor relationships with both customers and providers when payments are incorrect or missed altogether
- 3.3 Our current client record system (PARIS) has encountered a number of problems which the suppliers have been slow to resolve. In addition they have been unable to deliver a financial module which would have allowed us to discontinue use of our old system (CRRIS). Without this module we are having to double-enter data into both systems since no interfaces exist. This leads to increased workloads and data-mismatches
- 3.4 The CRRIS system is a legacy system which is now obsolete and could fail at any time. Yet it is the only system we have for holding details of care plans and contract prices
- 3.5 We currently accept service returns from providers (detailing the quantity and costs of care services they have delivered) via an online portal which again has no interfaces with other systems and which is considered cumbersome by many providers
- 3.6 Our current Empower card payment product has a number of weaknesses which have previously been reported. Whilst we have already, and continue to, corrected many of these issues it has required significant auditing resource and manual corrections to do so. This level of input is not sustainable in the longer term

4.0 Wards Affected

- 4.1 All wards

5.0 Local Ward Members

- 5.1 All Members

6.0 Policy Implications including - Carbon reduction - Health

- 6.1 The personalisation agenda and policy is one which is nationally driven but has been robustly supported by CEC who are widely regarded as a sector leader in this area. At its heart is the use of Personal Budgets – we must therefore have systems in place which support these in an efficient manner
- 6.2 Our Empower banking/card product has received significant publicity and won a national award. It would therefore avoid reputational damage if we could

identify a banking solution that resolves the implementation issues whilst allowing us to retain the Empower brand

7.0 Financial Implications (Director of Finance and Business Services)

- 7.1 The introduction of systems which give better financial management and provide clear audit trails will quickly identify instances of over-payment, allow quicker and easier clawback of such over-payments and allow us to quickly identify and resolve debt issues before they grow to unacceptable levels
- 7.2 The costs of the new systems are as yet unclear given that we have yet to begin formal tender processes. However through discussions with the current market leaders we are exploring different solutions. It is hoped that a banking product might be deliverable under the umbrella of our current banking supplier contract, the Co-operative Bank.

8.0 Legal Implications (Authorised by the Borough Solicitor)

- 8.1 Over recent months we have been subject to a number of legal challenges over various aspects of our payments and contracting regimes. The grounds for many of these will be removed once we have new systems, processes and audit trails in place
- 8.2 The introduction of new processes and banking products will place our Direct Payment offer on a much stronger legal footing
- 8.3 Legal services are represented on the Steering Group which is overseeing the proposed purchase and implementation. This involvement will ensure that all new developments are legally compliant
- 8.4 The clarity of our new offer will be such that it will be easier to ensure easily understandable contracts and agreements are put in place with both customers and providers. These will make plain the responsibilities and liabilities of all parties and will seek to minimise the monitoring burden on CEC

9.0 Risk Management

- 9.1 The most significant risk is that of failure of our CRRIS system which will leave us having to manage expenditure of some £90M manually. A 'do-nothing' position is therefore untenable.
- 9.2 As discussed earlier the new systems and processes are designed to reduce/eliminate the grounds for many of the legal challenges we have faced recently

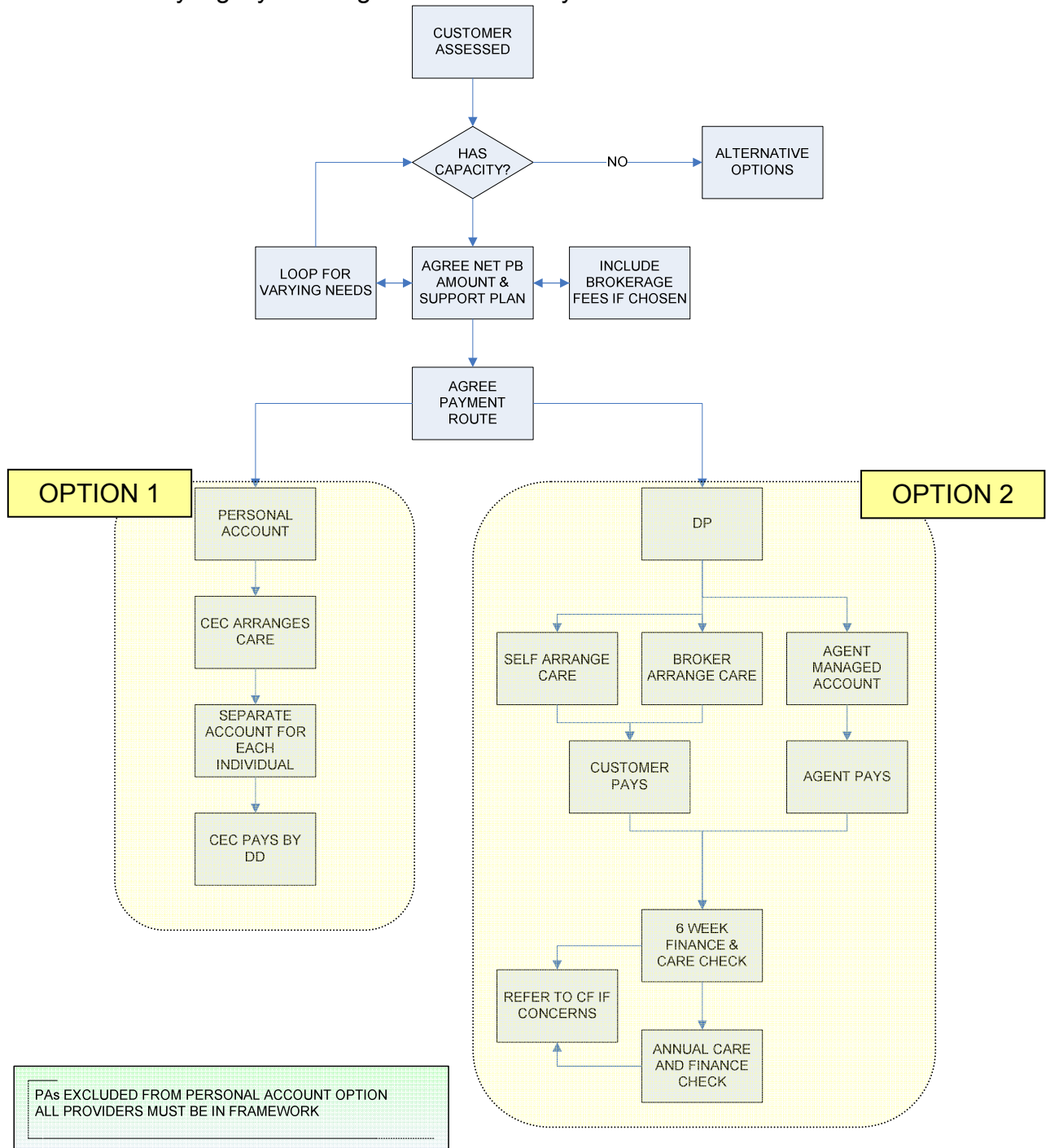
10.0 The Vision

10.1 The vision is that we will have a customer offer that has two clearly identified options:

a) A CEC Managed Personal Account

b) A Direct Payment

These options are shown pictorially below. It should be noted that a combination of the two will be possible – this is particularly important in retaining maximum usage of our in-house (Care4CE) service which cannot currently legally be bought with Direct Payment monies



10.2 CEC Managed Personal Account in operation:

- CEC will identify a choice of service providers and then make the detailed arrangements for the care to be delivered
- CEC will hold a 'master' bank or card account with subsidiary accounts arranged for each individual
- CEC funding for the care will be paid (net of client contribution) into the subsidiary account
- The customer will make their contribution via standing order or on-line
- Providers will submit 4-weekly service returns via the new contracts systems which will automatically monitor for correct delivery patterns (and flag any discrepancies for intervention)
- Providers will take payment from the account via Direct debit

10.3 Direct Payment in operation:

- After confirming that the customer has the capacity to manage a Direct Payment CEC will pay funds (net of customer contribution) into a separate customer bank account
- Customers will be offered a standard bank account from our chosen banker (branded as an 'Empower' account) as an option. Such an account will give online 'viewing privileges' to CEC in order to provide easy auditing
- Customer then has the choice of:
 - Arranging and paying for their own care
 - Having a broker arrange their care but with the customer managing payments
 - Commissioning an agent to arrange their care and manage payments on their behalf

11.0 The Systems

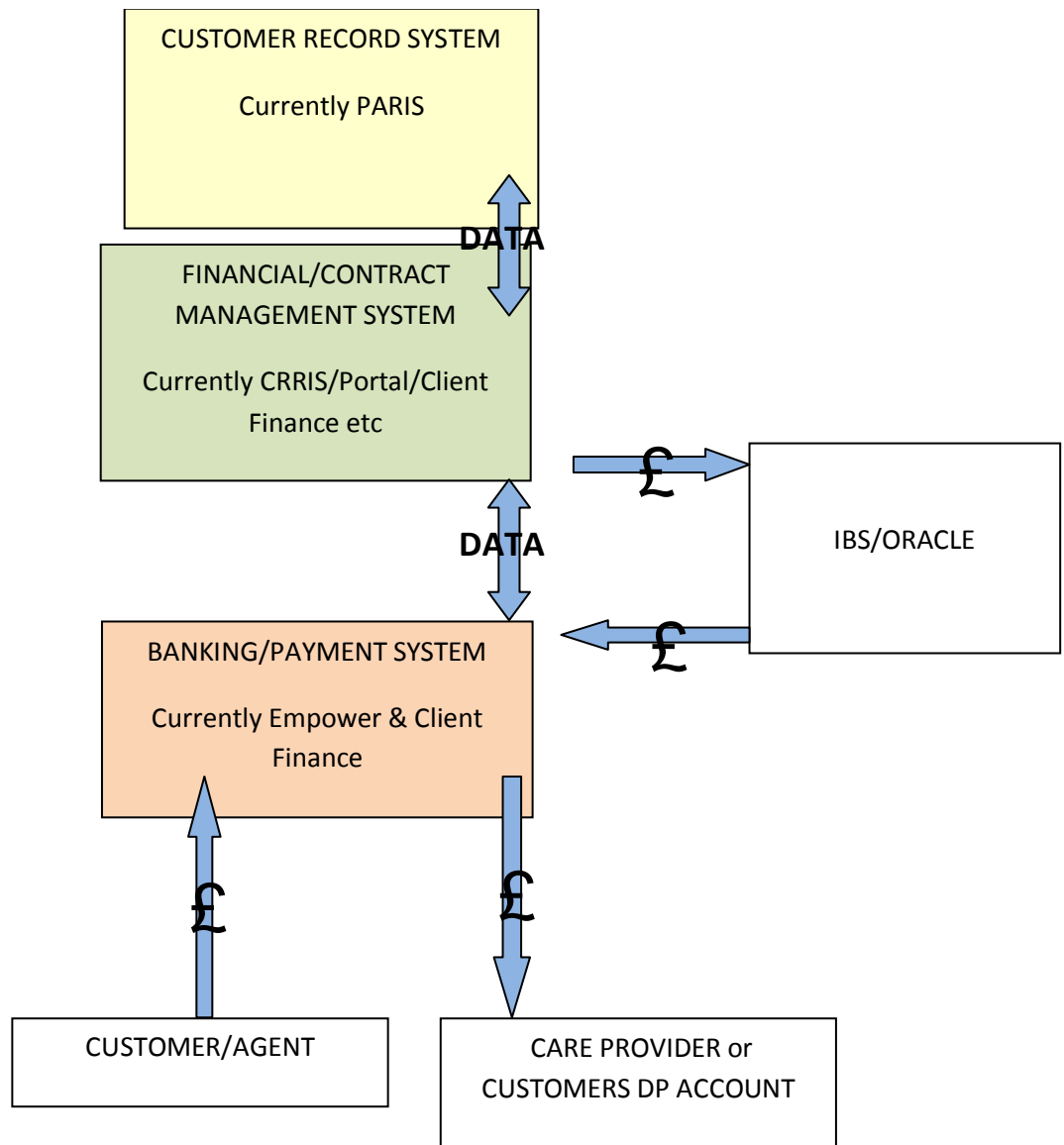
11.1 It is intended that we procure three separate, but integrate-able, systems as shown by the coloured boxes in the schematic overleaf.

11.2 The customer record system will be the main management tool used by social workers. It will record all personal details and assessment records

11.3 The contract management systems will hold details of the care plans for individuals together with information on the providers supplying services, costs and service delivery details

11.4 The banking/payment product will handle payments (both in and out) using some form of 'virtual accounts' separated by individual in order to simplify monitoring and auditing. The exact nature and mechanics of this system are currently undetermined as we view alternative solutions and proposals

11.5 All systems will be interfaced so avoiding double entry of data. They will also be required to interface to our existing Oracle/IBS system to give financial control via current processes



12.0 Procurement and Implementation timescales

- 12.1 Detailed implementation plans will be developed once a decision has been made on which systems to purchase. It is intended to purchase proven 'off-the-shelf' products wherever possible in order to minimise implementation delays and the risks inherent in attempting to design bespoke systems
- 12.2 The intention is to keep the procurement timescale as short as possible, yet within current rules. To this end we have identified a pre-approved 'Framework' list of possible suppliers which allows use of a simplified tender process
- 12.3 We have invited a number of suppliers to give preliminary demonstrations which will allow us to draw up high-level tender specifications for both the banking and contract management elements. We expect to have this available by the end of October.

- 12.4 The aim is then to have tenders returned and a purchase decision made by early January with installation and commissioning of systems completed as early as possible in 2013/14. We will seek an aggressive delivery timescale as part of the tender process but are mindful of the need to include an element of caution and to ensure functionality is properly specified and tested before go-live
- 12.5 Implementation will thus begin during 2013/14 with new customers only being added to the systems followed by those having reviews added in the second phase. This gradual implementation will allow for resolution of any 'teething' problems without major impact together with any adjustments to our processes necessitated by using off-the-shelf products.

13.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

Name: Dominic Oakeshott

Designation: Head of Business Management & Challenge

Tel No: 01270 686232

Email: Dominic.oakeshott@cheshireeast.gov.uk

This page is intentionally left blank

CHESHIRE EAST COUNCIL

REPORT TO: Adult Social Care Scrutiny Committee

| | |
|--------------------------|--|
| Date of Meeting: | 27 Sept 2012 |
| Report of: | Dominic Oakeshott, Business Support & Challenge |
| Subject/Title: | Adult Services Debt |
| Portfolio Holder: | Cllr. J Clowes |

1.0 Report Summary

1.1 This report seeks to inform Scrutiny Committee of current Adult Services debt levels, highlighting progress made in respect of recovery and seeks approval for debt avoidance and further recovery initiatives, to deal with debt in a more robust and proactive way.

2.0 Decision Requested

2.1 To note the current Adult Services debt position and support the plan to take a more proactive approach to debt recovery and debt avoidance practice for vulnerable customers.

2.2 To note the agreement to secure the following additional temporary resources for a 6 month period:

| Job Title | Grade | FTE | Salary Costs (at start point of grade) |
|---------------------|--------------|------------|---|
| Debt Administrators | 4 | 2 | £20k |
| Visiting Officer | 6 | 1 | £12k |
| Total | | 3 | £32k |

2.3 The above costs are being funded from within existing budgetary provision, but the individuals aiming to not only recover their own costs but also significantly increasing the recovery of debt generally.

2.4 To note the use of the Revenue Team's low-level Bailiff action as a next step action where prompts for payment have failed. This service is currently delivered free of charge through the Revenue Team and involves letter and telephone contact only – it is felt this may provide the prompt for payment in many cases as a pre-cursor to court action.

2.5 To note the use of Small Claims Court action where debt cases are deemed suitable for final debt recovery actions. This route may result in County Court action and would therefore require legal representation at Court. Court fees are required to be paid in advance and would cost between £150 and £500 per case depending upon the legal route decided which would need to be accounted for as a non-recoverable amount and written off/be funded by the Service.

2.6 To note the action to scope and evaluate procurement of external solicitors or to develop an internal service between Legal Services and Client Finance and progress the most cost effective method, to:

- Assist with complex challenging debt cases, particularly where property is involved or where a legal representative of the customer challenges Council or National policy. This route could include enforcement of property sale in some cases and to progress probate in order to settle deceased customer debt where the customer has died intestate or where the Next of Kin is deliberately delaying or refusing to wind up the estate to settle debt.
- To develop a framework for the selection of external solicitors, to act as Deputy in cases where the customer lacks capacity to manage their own complex affairs in respect of customers with more complex property and investment finances. It is likely that the Council will continue to have a need to offer a Corporate Deputyship service for cases classified as low supervision where there is no financial benefit to a Solicitor to take on the case.
- To develop a framework for the selection of external organisation/s to act as Appointee to manage a customer's welfare benefit income where the customer is deemed incapacitated, as an alternative to Corporate Appointeeship. This process will enable the downsizing of corporate appointeeship team and will free some resources in Client Finance to invest in other developments. It is likely that the Council will need to continue to offer a Corporate Appointeeship service for cases where there are insufficient balances for the customer to pay an on-going fee to an external organisation.
- To develop a new deferred debt policy which would afford the Council control over when a deferment is offered; in cases where there is a lack of cooperation by the customer the Council would charge and pursue full cost recovery. This policy would underpin enforcement of sale of property in certain cases or small claims court action for non-payment of debt and would introduce a system of annual re-valuation of property to ensure the Council does not over-inflate deferred charges where property sales are likely to realise a lesser amount.

3.0 Reasons for Recommendations

3.1 Adults who are eligible for social care support are financially assessed to determine their weekly contribution towards care using the Department's Non-Residential Charging Policy or The Department of Health statutory guidance 'Charging for Residential Care (CRAG)'. Customers are required to pay their weekly contribution on receipt of an invoice 4-weekly in arrears or into their direct payment account 4 weekly in advance.

3.2 Where a customer is entering long term care and leaves a property which is eligible for deferment of charges, the Council is obliged to offer to defer some of the customer's charges against the property. A Deferred Payment Agreement is entered into and a legal charge set against the property to secure the Council's debt.

3.3 A summary of the outstanding overdue debt as is shown in the table below:

| Debt Age Profile | 1 To 30 Days £ | 31 To 60 Days £ | 61 To 90 Days | 91 To 180 Days | 181 To 360 Days | 361 Plus Days | Total |
|--------------------------|---------------------------|----------------------------|----------------------|-----------------------|------------------------|----------------------|--------------|
| Percentage of total Debt | 7.1% | 4.9% | 3.7% | 11.1% | 16.1% | 57.1% | 100.0% |
| £/debt | 138,562 | 96,570 | 73,314 | 216,964 | 314,867 | 1,116,559 | £1,956,837 |

3.4 There are approximately 900 customers who have debts outstanding with the Council, and good progress is being made recovering debts, with £639,000 recovered during the first six months of the 2012/13. Overall debt levels have remained constant and have not increased during the same period, although new debts arising month by month continue to maintain overall debt levels. Work is hand to encourage customers to pay their charges as they arise aiming to prevent new long standing debt.

3.5 An important feature of Adults Social Care is that charges can be deferred against a customer's property. There are currently approximately 200 customers with around £3m of charges deferred against property. As described above taking proactive action to reduce the level of deferred charges is required and action taken within the team during the 2012/13 has already helped to recover £533k.

3.6 Debt is currently captured and reported within Client Finance once it becomes over-due (i.e.7 weeks from initial invoice) and arises as a result of a number of factors, such as;

- poor information provided to the customer on charging and payment methods. Would it be worthwhile reviewing the methods of payments people are using and encouraging them to pay by direct debit? Is there any way that we can take an on account payment pending financial assessment to reduce the potential debt figures?
- customer or their legal representative refusing to pay.
- customer capacity to manage their financial affairs is lost.
- safeguarding and deprivation of assets.
- poor commissioning practice or communication such as advising services are 'free of charge' or failure to load service interventions into systems at the start of the provision.
- late service returns from care providers which generate late or multiple customer invoices once loaded through the Council system.
- customers choosing to pay their care provider top up fees rather than pay their contribution to social care services.
- lack of debt administrative staff, legal resources and a reluctance to pursue debt through court action previously.
- lack of robust deferred debt procedures to avoid debt where a customer does not cooperate with policy.

3.7 Discussions with Corporate Finance have highlighted that debt is managed and reported elsewhere across the Council as soon as the Debt is raised and becomes due. A review is underway to align the current practice within Client Finance with that elsewhere in the Council. This will allow the activity and resource supporting current debt, mentioned below, to be better aligned alongside the activity and resource pursuing overdue debt, where the resource has traditionally been constrained.

3.8 Adult Services have many historic debt cases which have not been pursued actively due to the lack of resources and clear processes within Adult Services. Some cases will now fall into the category of statute-barred and become non-pursuable as they are over 6 years old and will need to be written-off. It is likely that the significantly older debts will, including those that are already statute barred or those nearing that point, will in effect be non-pursuable and need writing off. A review of those debts in that position is currently in hand. The action since April has been positive with over £1.1m of overdue debt being collected, the actions in this report are aimed at further reducing and recovering overdue debts whilst also taking proactive action to stop current debts becoming overdue wherever possible.

4.0 Wards Affected

4.1 All wards - the table below from the local records as at the end of August shows debt by ward, with the total differing slightly with the overall debt position reported currently.

| Area | No of Clients | Total Debt |
|------------------------|---------------|-------------|
| Adlington | 1 | £182.00 |
| Alderley Edge | 7 | £3,104.55 |
| Allostock Knutsford | 1 | £200.00 |
| Alsager | 5 | £3,387.29 |
| Audlem | 5 | £7,180.18 |
| Bickerton | 1 | £13.68 |
| Bollington | 5 | 3,029.26 |
| Buglawton | 1 | £422.16 |
| Chelford | 1 | £915.66 |
| Chorley | 1 | £627.59 |
| Church Lawton | 3 | £3,992.65 |
| Congleton | 99 | £418,710.46 |
| Crewe | 218 | £560,547.22 |
| Disley | 1 | £0.06 |
| Goostrey | 6 | £10,434.35 |
| Holmes Chapel | 6 | £18,452.43 |
| Knutsford | 28 | £30,245.16 |
| Macclesfield | 153 | £290,457.20 |
| Middlewich | 23 | £32,867.97 |
| Mobberley | 3 | £1,086.53 |

| | | |
|--------------|------------|----------------------|
| Nantwich | 56 | £136,492.92 |
| Plumley | 1 | £4,649.57 |
| Poynton | 14 | £24,943.06 |
| Prestubury | 3 | £5,214.79 |
| Rode Heath | 1 | £750.00 |
| Sandbach | 31 | £35,662.73 |
| Siddington | 1 | £2,043.92 |
| Somerford | 1 | £701.00 |
| Wilmslow | 41 | £89,157.50 |
| Wynbunbury | 1 | £2,336.69 |
| Out of area | 183 | £445,304.54 |
| Total | 901 | £2,133,113.12 |

5.0 Local Ward Members

5.1 All ward members

6.0 Policy Implications including - Carbon reduction - Health

6.1 A new and robust Adult Services Debt Recovery and Write-Off Procedure has been written and launched, which has been developed within the parameters of the Corporate 'Income to Cash' Debt Policy. The initial aim is to take proactive action to encourage the early payment of charges in the first instance, recovery of debt in the second instance, before finally after exhausting all other avenues seeking approval to write off debt in an appropriate timescale.

6.2 Options within this paper require the Council to be more proactive in debt recovery actions, which may result in challenging publicity around court action against vulnerable adults.

6.3 A new and robust Deferred Debt Policy has been drafted for legal comment before ratification and launch.

7.0 Financial Implications (Director of Finance and Business Services)

7.1 Debt is managed within Adults Client Finance Service using the following resources :

| Grade | Role | Annual on-costs | Comment |
|-------------------------------------|-------------------------|-----------------|--|
| 1 x Grade 9 (protected Gr 10) | Team Supervisor | £43,002 | Overseeing debt and audit function. Primary focus on Deferred debt with little capacity for further activity. |
| 1 x Grade 7 | Team Support Officer | £29,506 | |
| 2 x Grade 4 | Admin | £40,758 | Dealing with approx 140 new debt cases every 4 weeks as well as prompting payment for the 800 debt cases. This is proving insufficient |

| | | | |
|-------------|-----------------|----------|--|
| | | | resource for current demand. |
| 1 x Grade 8 | Legal Executive | £33,893 | Temporary to March 2013 with primary focus on recovery of dec'd customer debt. |
| | | £147,159 | |

7.2 Adult Services are piloting the use of internal debt recovery processes using the Legal Executive resource to develop Small Claims Court Action, accessing specialist legal advice from existing legal frameworks. Results of this pilot will be analysed and should it be found necessary to procure debt recovery legal services the cost to Cheshire East Council Adult Services have been estimated as follows:

| Type of Action | Est. annual numbers | Estimated debt value by category | Est. annual CEC Recovery based on 20% legal fee | Est. annual Write off anticipated |
|----------------------------|---------------------|----------------------------------|---|-----------------------------------|
| Complex & Challenging Debt | 20 | £180k | £144k | £36k |
| Enforced Sale Action | 10 | £250k | £200k | £50k |
| Probate completion | 50 | £100k | £80k | £20k |
| Small Claims Court | 600 | £1.5m | £1.2m | £300k |
| Total: | 680 | £2.03m | £1.6m | £406k |

7.4 Adult Services currently hold a £1.6m bad debt provision and an additional £0.3m for a deferred bad debt provision. Recovery of debt will reduce the need for the current level of bad debt provision allowing additional funds to be released towards savings.

8.0 Legal Implications (Authorised by the Borough Solicitor)

8.1 Local authorities can take steps to recover contributions towards care charges, and their assessment of ability to pay may take into account property or capital that has been given away for the purpose of avoiding means testing. Their enforcement options include:

- taking proceedings in the Magistrates' Court to recover sums due as a civil debt (section 56, National Assistance Act 1948).
- Imposing a charge on any property belonging to the resident with interest chargeable from the day after death (sections 22 and 24 of the Health and Social Services and Social Security Adjudication's (HASSASSA) Act 1983).
- Imposing a charge on property transferred by the resident, within six months of going to residential care or whilst receiving care services, on property transferred by the resident with the intention of avoiding contributions (section 21, HASSASSA Act 1983)

8.2 If the debt for unpaid contributions reaches £750, the local authority could start insolvency proceedings to declare the resident bankrupt. Transactions below that value may be set aside within two years, or within five years if the person made bankrupt was insolvent at the time of the transaction, which is unlikely. (See section 339-341 Insolvency Act 1986). A gift may be set aside without time limit and without

bankruptcy if the court is satisfied that the transfer was made for the purpose of putting assets beyond the reach of a potential creditor or otherwise prejudicing the creditor's interests.

8.3 This provision is exceptionally wide and the court has extensive powers to restore the position to that which it would have been, had the gift not been made.

9.0 Risk Management

9.1 Although some local authorities have threatened to use insolvency proceedings, few have actually done so, perhaps because of lack of expertise, cost or the prospect of bad publicity. The proposals contained herein seek to minimise the costs and publicity elements by adopting a staged, sensitive approach using appropriately qualified staff and legal expertise.

9.2 Client Finance Grade 9 and 7 supervisors are wholly occupied on deferred debt actions leaving little time to oversee and develop debt avoidance admin processes. Temporary Additional resource to relieve pressure has recently been agreed to assist the principle of right first time, with individuals being clear of their contribution at the outset, and issues being tackled at the earliest point.

9.3 It has been identified that there is a need to annually review accrued Deferred Debt in line with annual property valuation, to reduce the risk of over-inflating debt figures and to ensure costs and charges are correctly accounted for.

10.0 Background and Options

10.1 A range of mitigating actions have been put in place over the past 6 months to address some of this historic debt and prevent new debt from occurring, these include:

- A new and robust Debt and Write Off Policy written and launched.
- Financial Assessment Officers take responsibility to discuss payment of contributions with the customer and to encourage payment by Direct Debit. The Finance Officer will retain customer cases until the first 2 payments have been made, in an attempt to identify and address debt problems at the earliest opportunity. Is this showing any evidence of improving methods of collection?
- An audit of direct payment accounts will be introduced during the first 12 weeks after inception to ensure the direct payment is running in accordance with agreement. Vacant administrative posts within the Client Finance Debt team being filled on a temporary basis.
- Temporary Legal Executive role until March 2013 with an initial focus on deceased customer debt and in the first 3 months they have recovered £45k. This post has highlighted a need to secure external solicitor assistance to progress probate in a number of cases.
- Client Finance is working closely with Revenues Service to identify and clear older debt.
- The Department is progressing cases for write off where there is no hope of recovery.

- Client Finance have progressed a pilot of 5 cases through the existing Revenues external solicitors who have offered to provide an initial 'free of charge' service to take court action to force the sale of property in order to settle deferred debt. This pilot is currently on hold as cases passed through to the external solicitor were found to be too complex and out of scope for the pilot and so a further 5 cases are yet to be identified to test this enforced sale action route. This pilot has highlighted a need for internal or external legal guidance in complex debt case management, particularly where the authority is challenged through customer's solicitors. As such we are piloting 5 complex debt cases through small claims court action.
- Counsel opinion has been sourced for the treatment of property for charging purposes in complex and disputed circumstances. Many cases where this Counsel opinion has been applied, continue to be challenged through customer's legal representatives.
- Client Finance recognises the need to have a far more robust Deferred Debt Policy, taking account of other local authority practice to ensure we do not accept financial responsibility in cases where the customer clearly has no intention of cooperating with Council processes. This may include accessing tracing and credit rating agents.
- Client Finance has developed robust management data on debt and recovery levels but needs to do more around the levels of deferred debt and prevent new debt.
- Personalisation Policy launched with clear processes for the management of Direct Payments to ensure customer contributions are made and those with debt are deemed unsuitable to hold their own direct payment.
- All Empower accounts are under review with debt being addressed and those with debt deemed unsuitable to continue with this option.
- Strategic Commissioning have engaged consultants to review the care market fees and within this the practice of providers requiring a "top up" payment will be explored. It is likely that another recommendation will be to require care providers to collect client contributions and receive payments from the Council net of the client contribution. Client Finance will contribute to the suggestions/recommendations which will help to address issues of debt and improve communication.

11.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer.

Name: Alison McCudden
Designation: Client Finance Manager
Tel No: 01260 371191
Email: Alison.mccudden@cheshireeast.gov.uk

CHESHIRE EAST COUNCIL

REPORT TO: ADULT SOCIAL CARE SCRUTINY COMMITTEE

Date of Meeting: 27th September 2012

Report of: Dominic Oakeshott (Business Management & Challenge)

Subject/Title: Empower Update

Portfolio Holder: Councillor Janet Clowes

1.0 Report Summary

- 1.1 This report provides a high level briefing and further update on the Council's prepaid social care card product (known as the Empower card) since the last update to ASC Scrutiny on 15th March 2012.
- 1.2 The rapid increase in the take up of such a new and innovative process created a number of issues, with both the product itself and associated processes, and therefore the Council approved a 'pause' in the roll-out of the Empower card in November 2011 as part of a post-implementation review. This pause became indefinite in March 2012 pending completion of a detailed review of all card accounts. During this time, no new customers have been given an Empower card.
- 1.3 The strategic Empower Steering Group continues to oversee this 'pause', meeting on a regular basis. The Task Team now operates under the Head of Business Management & Challenge. The work commenced in February 2012 and is being carefully managed. As the review continues, communication with our customers, carers, third sector organisations and care agencies is crucial and this is part of that process.
- 1.4 Internal administrative processes have been reviewed and improved within the Empower, Direct Payments and debt recovery teams, and interactions clarified between Client Finance and both care management and shared services, to ensure that these issues are minimised going forwards. Training for all relevant staff on the revised processes was delivered in May 2012.
- 1.5 Work is ongoing to review alternative products now available in the current market place that may better meet the needs of CEC and its customers, including prepaid card developments. This is being co-ordinated with other strategic social care and finance products.
- 1.6 Since the initial 'pause' with the Empower card for new customers, many areas of activity have been reviewed. There is now far more stability in the system now, and better information available to monitor and resolve queries efficiently. However, the complexity of the situation and pace of change has resulted in the process taking far longer than had been anticipated at the outset.
- 1.7 The strategic and operational plans to establish a new platform and systems, ready to move implement in a phased, planned and managed way from April 2013, are progressing alongside the continued audit and stabilisation processes for the existing product as described above.

2.0 Recommendations

- 2.1 That the Committee notes the continued progress of the review of all Empower card customer accounts (and associated care reviews).
- 2.2 That the Committee endorses the Council's continued exploration and evaluation of the current pre-paid card product against alternative options now available in the market.

3.0 Reasons for Recommendations

- 3.1 The Council puts the interests of individual customers at the centre of its social care processes, in accordance with its statutory responsibilities.
- 3.2 The Council needs to support the local provider market while this review is taking place and be mindful of maintaining a stable market within the borough.
- 3.3 It is important that the Empower card product is reviewed post implementation, all appropriate views gathered and alternative options identified and properly evaluated.

4.0 Wards and Local Ward Members Affected

- 4.1 All wards and local ward members are affected, as the Empower card is used Borough-wide.

5.0 Policy Implications

- 5.1 Direct Payments and the Empower card are central to the Council's response to the Government's Personalisation agenda for Adult Social Care.
- 5.2 In addition, the card is the Council's preferred and primary payment mechanism to community social care providers.

6.0 Financial Implications

- 6.1 The Adult Social Care budget is projecting a £4.1m overspend as at 2012/13 First Quarter Review, reported elsewhere on this agenda. The Council is projected to spend £16.8m on Direct Payments (including Empower) in 2012/13, and has target remedial action plan of £0.5m of fund recovery supporting Individual Commissioning.

7.0 Legal Implications

- 7.1 The Borough Solicitor is represented on the Empower Steering Group. In addition, legal advice has been obtained on the proposed changes to the Direct Payments Agreement and revised Direct Payments procedures.

8.0 Risk Management

8.1 The Council is managing a number of potential risks through this process. These include:

- Potential loss of Council funds
- Customer safeguarding through inappropriate card use
- Card system failure
- Legal challenges on the operation of the card.

9.0 Background and Options

9.1 The Empower program is Cheshire East Council's innovative and leading-edge mechanism for the delivery of social care personal budgets.

9.2 As of the end of August 2012, just under 850 Council social care customers are receiving their personal budget by a payment onto an Empower card (approx. £600,000 in total every four weeks); however, new customer cards have been 'paused' since November 2011 as a comprehensive post-implementation review is undertaken, including a detailed audit of every card issued (both current and closed) since the program's launch in early 2010.

9.3 This review was triggered by significant and multiple post-implementation issues that arose and threatened to overwhelm the original benefits envisaged from the product, for cardholders, provider agencies and the Council. These issues were having a significant detrimental impact on the ability of vulnerable social care customers to access the care they needed in an effective and efficient manner, and also impacting on payments to care agencies, that were subsequently experiencing significant pressures on cash flow.

9.4 The review has been overseen by an Empower Steering Group under the leadership of the Director of Children, Families & Adults and with representation from the Director of Finance & Business Services and the Borough Solicitor. A project manager to lead this review was seconded from Finance, and additional resources made available from Benefits and elsewhere to constitute an Empower Audit Task Team (EATT).

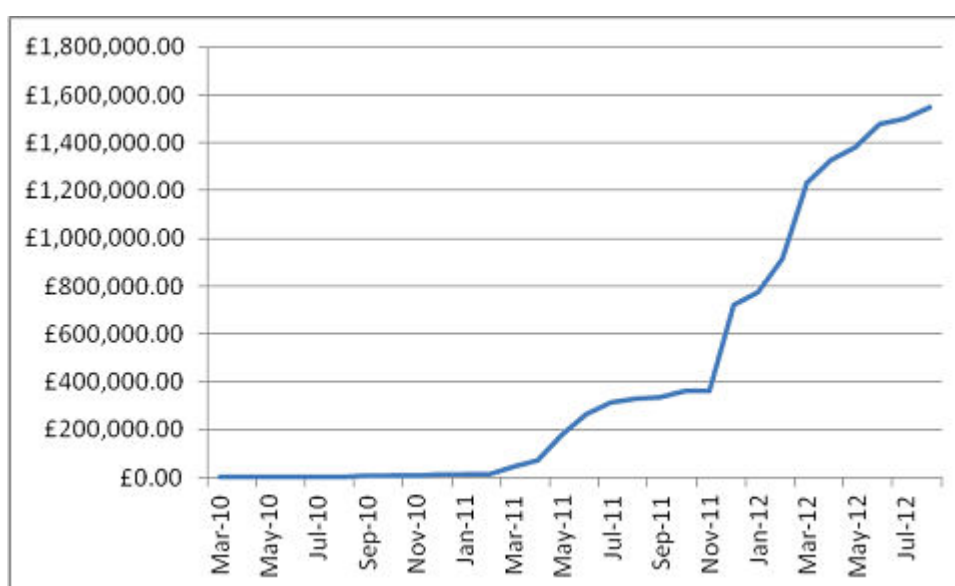
9.5 Feedback sought from customers, care agencies and other interested parties such as the Cheshire East LINK has highlighted significant concerns with the implementation, but an overall desire to retain the positive features that the Empower product facilitated. An initial report to the Adult Social Care Scrutiny Committee on 15/3/12 contains further background information.

9.6 The EATT has prioritised auditing all cards held on behalf of individual customers by care agencies. There are around 75 agencies holding a total of 1,500 cards (both current and closed); however, the 10 biggest agencies hold 900 cards between them. The guidance given by the Council to these agencies at the outset about how to operate the cards was not clear or extensive, and as such the practices followed (both operational and financial) have varied from agency-to-agency, both in practical and in quality terms.

- 9.7 Queries from individuals around the Empower system are also being managed on a case-by-case basis (there are a further 475 current or closed Empower cards held by customers themselves or their representatives), and the Council now has sufficient information to answer these efficiently and effectively. Feedback from individuals so far has been constructive in the main, leading to satisfactory repayment outcomes when challenged.
- 9.8 The work to validate payments made, particularly where customer contributions are involved, is complex, as the information required is held in multiple IT systems which are not fully integrated, and this has been exacerbated by the fact that the cards are 'live' accounts, often held in large numbers by single care agencies and by the necessary delay as information is shared between agencies and the Council.
- 9.9 Establishing agreed amounts with sufficient certainty at a given point in time is not easy, and can take many hours of investigation, regular and significant rework and has to date required senior input to resolve the issues. In some cases, this has also required re-visiting the payment arrangements that predated the Empower implementation, known as DP Lite Managed Accounts, which has further complicated the exercise.
- 9.10 As at the end of August 2012, 33 care agencies had been contacted with requests for audit information (covering a total of 1,291 cards, or approx 85% of all cards held by agencies).
- 9.11 Of those:
- 2 agencies have completed the process (139 cards)
 - 6 agencies have completed the process with issues outstanding pending resolution (421 cards)
 - 12 agencies are at varying stages of audit completion (268 cards)
 - 5 agencies have submitted only partial information with additional information requested (235 cards)
 - 8 agencies have not responded to the audit request despite reminders sent (228 cards).
- 9.12 Work to complete all these reviews is ongoing, with an update briefing to care agencies arranged for October 2012.
- 9.13 Initial findings indicate that, amongst other things, there are significant amounts of unpaid customer contribution going back a number of months. Where necessary, the Council is settling overdue customer accounts with care agencies and then seeking to recover this from the individual customers concerned through normal debt recovery functions. It is important to note the sensitivity recovering unpaid contributions from customers with the Empower card and where necessary and appropriate discussions will be held with customers about the amounts owed.
- 9.14 Quantifying the financial impact of this is difficult at this early stage and is based on a small sample of data that is not statistically representative, but the following represents a summary to date from the two completed agencies:

- A total of just under £40,000 has been recovered in unused funds (average £280 per card)
- Around 15% of customers had overpaid contribution; just over £16,000 has been returned to them (average across all cards, not just those that were overpaid, of £119 per card)
- Around 37% of customers had underpaid contribution; a total of just over £36,000 has been identified for debt recovery (average across all cards, not just those that were underpaid, of £261 per card)

9.15 The graph below shows the increase in social care funds recovered through enhanced DP audit processes and prioritised resources since the 'pause' and introduction of the EATT (including the £40,000 identified above). This will continue as all audits are completed and a backlog in 'traditional' Direct Payment audits is prioritised.



Note: Figures for the first six months since March 2010 are difficult to confirm with certainty, as record-keeping was unclear during that period (there was around £80k recovered during that period with no date attached).

- 9.16 During 2011/12 £0.5m was recovered and included with the outturn for Children, Families and Adults and as detailed above a further prudent £0.5m has been assumed as the potential recovery during 2012/13 after allowing for increases in bad debt provisions and payments to providers. Close scrutiny will remain and should it be possible to increase the anticipated level of mitigation this will assist in reducing the departments forecast overspend.
- 9.17 A high level vision has been devised that seeks to simplify the arrangements and provide the basis for specifying a replacement for the Adult and Children's Financial Systems. The aim is to reduce the number of options and solutions to the minimum. This will include a Direct Payment option, as this is required by law, but may also include a 'personal account' (technically, a Council-managed account) that enables a Personal Budget to be taken on an improved Empower platform, retaining all of the advantages of the current product but improving the simplicity and functionality for customers and the Council.

10.0 Access to Information

- 10.1 For any further details or background information, please contact Dominic Oakeshott, Business Management & Challenge (01270 686232).

Name: Martin Middleton
Designation: Direct Payments Project Manager (Interim)
Tel No: 01270 686230
Email: martin.middleton@cheshireeast.gov.uk

This page is intentionally left blank

CHESHIRE EAST COUNCIL

REPORT TO: ADULT SOCIAL CARE SCRUTINY COMMITTEE

| | |
|-------------------------|-----------------------|
| Date of Meeting: | 27 September 2012 |
| Report of: | Borough Solicitor |
| Subject/Title: | Work Programme update |

1.0 Report Summary

- 1.1 To review items in the 2012/13 Work Programme, to consider the efficacy of existing items listed in the schedule attached, together with any other items suggested by Committee Members.

2.0 Recommendations

- 2.1 That the work programme be received and noted.

3.0 Reasons for Recommendations

- 3.1 It is good practice to agree and review the Work Programme to enable effective management of the Committee's business.

4.0 Wards Affected

- 4.1 All

5.0 Local Ward Members

- 5.1 Not applicable.

6.0 Policy Implications including - Climate change - Health

- 6.1 Not known at this stage.

7.0 Financial Implications for Transition Costs

- 7.1 None identified at the moment.

8.0 Legal Implications (Authorised by the Borough Solicitor)

- 8.1 None.

9.0 Risk Management

- 9.1 There are no identifiable risks.

10.0 Background and Options

- 10.1 In reviewing the work programme, Members must pay close attention to the Corporate Plan and Sustainable Communities Strategy.
- 10.2 The schedule attached, has been updated in line with the Committees recommendations on 5 July 2012. Following this meeting the document will be updated so that all the appropriate targets will be included within the schedule.
- 10.3 In reviewing the work programme, Members must have regard to the general criteria which should be applied to all potential items, including Task and Finish reviews, when considering whether any Scrutiny activity is appropriate. Matters should be assessed against the following criteria:
- Does the issue fall within a corporate priority
 - Is the issue of key interest to the public
 - Does the matter relate to a poor or declining performing service for which there is no obvious explanation
 - Is there a pattern of budgetary overspends
 - Is it a matter raised by external audit management letters and or audit reports?
 - Is there a high level of dissatisfaction with the service
- 10.4 If during the assessment process any of the following emerge, then the topic should be rejected:
- The topic is already being addressed elsewhere
 - The matter is subjudice
 - Scrutiny cannot add value or is unlikely to be able to conclude an investigation within the specified timescale

11.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

Name: Mark Grimshaw
Designation: Scrutiny Officer
Tel No: 01270 685680
Email: mark.grimshaw@cheshireeast.gov.uk

As of 19/09/2012

Adult Social Care Scrutiny Committee: May 2012 – October 2012

Next Agenda Setting Meeting: 27 September 2012

Possible Future Issues / Items (Chronology)

Meeting dates:

| Month | Oct | Nov | Dec | Jan | Feb | March | April |
|--|-----|-----|-----|-----|-----|-------|-------|
| Adult Social Care Scrutiny Committee (Thursday) 10.00 am: Westfields | 18 | 29 | 18 | 31 | 28 | 28 | 24 |

| Item | Notes | Suggested Action | Due Date and Status |
|--|---|---|---------------------|
| Preventative and re-ablement services | | | 18 October 2012 |
| Improvements to Adult Social Care website | | | 18 October 2012 |
| Quality of Domiciliary Care | Requested on 2 August 2012 – suggested that the Committee get a service user perspective. | Possible Task Group | 18 October 2012 |
| Action plan and timetable of action from LSAB report | Requested on 2 August | | 18 October 2012 |
| Dementia T&F Review | | To consider the final draft of the report and approve for Cabinet consideration | 29 November 2012 |
| Complaints T&F Review | | To consider the final draft of the report and approve for Cabinet consideration | 29 November 2012 |
| Returning Self Funders | Requested on 2 August 2012 | To be considered when sufficient data on returning self funders is | TBA |

| | | | |
|----------------------------------|---|------------|------------------------|
| | | available. | |
| Residential provision T&F Review | Update on recommendations – Cabinet response. | | 31 January 2013 |

Items to be considered:

Training Requirements/Site Visits:

Learning Disabilities – workshop to explain the pressure on the ASC budget – tba (November 2012)

Disregarded / Discontinued Items

| Item | Date | Reason |
|---|-------------|---|
| Understanding the personalisation agenda | 11/07/2011 | Included in 'Think Local, Act Personal' item |
| Support for Carers | 11/08/2011 | Superseded by Carers Strategy |
| Understanding the 'lifestyle concept' including lifestyle centres | 14/09/2011 | To be considered by H&WB Committee |
| Review of the efficiency of people who self fund social care | 07.10.2011 | To be considered as part of the residential provision T&F review. |
| | | |
| | | |

Task Groups – potential/current/completed

| Title | Notes | Actions |
|---|--|---|
| Dementia Services | Postponed due to election. Agreed to continue the work of the T&F group | Reconvened – expected to report |
| Future Arrangements/Provision of Residential Care | <p>At the meeting of the Council on 21 April 2011 a Notice of Motion had been submitted by Councillors D Flude and C Thorley regarding instability in the residential care market in Cheshire East and its potential impact on the finances of the Council. It was requested that a Scrutiny Committee Task and Finish Group be set up to determine the best means of managing demand for residential care including demand from returning self funders.</p> <p>RESOLVED</p> <p>That the matter be referred to the Adult Social Care Scrutiny Committee with a view to them examining the matter and reporting back on:</p> <ul style="list-style-type: none"> • The stability of the residential care market in Cheshire East • The availability of residential care at affordable prices in Cheshire East • The success or otherwise of current measures to manage the demand for residential care in Cheshire East. • The success or otherwise of measures to support self funders to remain independent of Council funding for longer | Membership agreed 22/9. |
| Complaints T&F Review | Agreed to be established at the informal meeting held on 7 June 2012 | Membership to be ratified. |
| Excess Winter deaths | Suggested as joint task and finish review with the Health and Wellbeing Committee – Proposed Members: Mo Grant, Arthur Moran and Brian Silvester | To be discussed on 27 th September 2012. |

Dates of Future Cabinet Meetings

15 October 2012, 12 November 2012, 10 December 2012, 7 January 2013, 4 February 2013, 4 March 2013, 2 April 2013, 29 April 2013

Dates of Future Council Meetings

11 October 2012, 13 December 2012, 21 February 2013, 18 April 2013.

This page is intentionally left blank