

# ADULTS COMMITTEE



**Date: Thursday, 10 January 2019**

**Democratic and Members' Services**

Fiona McMillan

Monitoring Officer

**14:00hr**

Shire Hall

Castle Hill

Cambridge

CB3 0AP

**Kreis Viersen Room**

**Shire Hall, Castle Hill, Cambridge, CB3 0AP**

## AGENDA

Open to Public and Press

### CONSTITUTIONAL MATTERS

1. **Apologies for absence and declarations of interest**

*Guidance on declaring interests is available at*

<http://tinyurl.com/ccs-conduct-code>

2. **Adults Committee Minutes - 13.12.18**

**5 - 10**

**Adults Committee Actions - January 2019**

**11 - 16**

3. **Petitions and Public Questions**

### KEY DECISIONS

4. **Care Home Development Workstream 2 to Commission New Block Contracts**

**17 - 26**

5. **Discharge and Transition Car**

**27 - 34**

## **DECISIONS**

- |           |  |                 |
|-----------|--|-----------------|
| <b>6.</b> | <b>Review and Redesign of Older People's Day Opportunities</b> | <b>35 - 48</b>  |
| <b>7.</b> | <b>Delayed Transfers of Care (DTOC) Progress Report</b>        | <b>49 - 60</b>  |
| <b>8.</b> | <b>Adults Positive Challenge Programme</b>                     | <b>61 - 72</b>  |
| <b>9.</b> | <b>Finance and Performance Report - November 2018</b>          | <b>73 - 122</b> |

## **INFORMATION AND MONITORING**

- |            |  |                  |
|------------|--|------------------|
| <b>10.</b> | <b>Adults Committee Agenda Plan - January 2018</b> | <b>123 - 126</b> |
|            | <b>Adults Training Plan 2018 -19</b>               | <b>127 - 128</b> |

### **Date of Next Meeting**

21st March 2019

The Adults Committee comprises the following members:

Councillor Anna Bailey (Chairwoman) Councillor Mark Howell (Vice-Chairman)

Councillor Adela Costello Councillor Sandra Crawford Councillor Janet French Councillor Derek Giles Councillor Mark Goldsack Councillor Nichola Harrison Councillor David Wells and Councillor Graham Wilson

*For more information about this meeting, including access arrangements and facilities for people with disabilities, please contact*

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**ADULTS COMMITTEE: MINUTES**

**Date:** Thursday 13 December 2018

**Time:** 2.00 pm to 3.20 pm

**Present:** Councillors A Costello, S Crawford, J French, N Harrison, M Goldsack, J Gowing, M Howell (Vice-Chairman), S Van de Ven and D Wells.

**Apologies:** Councillor A Bailey (Substituted by Councillor J Gowing), Councillor D Giles and Councillor G Wilson (Substituted by Councillor S Van de Ven).

**143. APOLOGIES FOR ABSENCE AND DECLARATIONS OF INTEREST**

Apologies received from Councillors A Bailey, D Giles and G Wilson. No declarations of interest received.

**144. MINUTES – 15 NOVEMBER 2018 AND ACTION LOG**

The minutes of the meeting held on 15 November 2018 were agreed as a correct record and signed by the Vice Chairman. The action log was noted.

**145. PETITIONS AND PUBLIC QUESTIONS**

No petition or public questions were received.

**146. WINTER PRESSURES AND ADDITIONAL PUBLIC FUNDING**

The Committee considered a report that provided an overview of the approach to managing winter pressures and the proposed investment of the recently announced £2.395 million national Hancock monies.

To address the primary cause of social care related Delayed Transfers of Care (DTOCs), it was proposed to utilise the money to;

- Increase capacity of reablement provision to deliver domiciliary care as the provider of last resort £300k and,
- Purchase additional 2956 hours per week of domiciliary care via discharge cars £2,100k.

In discussing the report Members:

- Noted that delays were primarily due to the lack of domiciliary care capacity.
- Noted that guidance from Government on how to utilise the monies gave no provision regarding governance arrangements. It had been agreed with

Health Colleagues that decisions on spend would be taken at Adults Committee.

- Discussed the need to flex how the money was utilised as winter progressed and gave Officers permission to do this.
- Welcomed that the additional 10 FTE Reablement Support Workers and noted that they would be deployed across the County.
- Noted that winter pressures were a long term issue and this had been addressed in the impending local government budget announcement.
- Discussed the ongoing challenges with recruitment and noted the recent successful recruitment campaigns. Members congratulated officers on the award received for the reablement recruitment campaign. Members noted that the reablement service was currently fully staffed with around 300 staff but that recruitment would continue to ensure that any gaps would be filled accordingly.
- Queried work with NHS colleagues to make further improvements. Members noted that there were a number of ongoing pieces of work with NHS partners and that the Capacity Board for Health and Social Care focused on demand on the system and capacity going forwards.
- Noted that CCC may want to release some of the hours purchased to Health and that collaboration with Health colleagues was crucial. It was essential that the criteria and guidelines were followed to best effect to reduce the DTOCs and do what was right for the patient.
- Noted that the domiciliary hours commissioned would need to be flexed on a daily basis and that there would be a report on a monthly basis on spend. Members requested that the DTOC dashboard be circulated to the Committee on a monthly basis. **ACTION**
- Queried the capacity of agencies to meet the additional hours and noted that CCC were confident that they could already meet half of the hours. Other solutions would be sought if necessary to meet the additional hours.
- Sought clarity on CCCs relationship with Allied Health Care. Members noted that Cambridgeshire had some packages with them and that the local branch had been excellent. The business had been sold to a new provider and CCC were working with them to keep continuity of care.

It was resolved unanimously to:

- a) to approve the investment of the £2.395 million Hancock monies as set out in the report,
- b) to approve the flex of funding to meet the outcomes set out by Government.

**147. CAMBRIDGESHIRE COUNTY COUNCIL – ADASS REGIONAL SELF ASSESSMENT**

The Committee received a presentation on the self assessment of Adult Social Care in Cambridgeshire along with a report summarising the key findings.

In considering the report Members:

- Noted that a buddying session had taken place recently with colleagues in Southend and in the New Year there would be an external challenge and then a regional report and action plan would be produced.
- Queried a point on the slide (page 56 of the papers) outlining where Cambridgeshire was doing better than national /regional average, 'Permanent admissions to care homes'. There was a need to clarify that this meant that permanent admissions were low. **ACTION**
- Queried the examples of best practice on page 46 of the papers and asked for them to be simplified. **ACTION**
- Requested some simple metrics be added to the presentation in the performance section. **ACTION**
- Requested that on the voluntary sector slide, (page 52 of the papers) the wording was made clearer. **ACTION**
- Requested that the Neighbourhood Cares Pilot be highlighted in the presentation. **ACTION**
- Requested that on the 'Areas for improvement' slide the word 'both' should be removed. **ACTION**
- Questioned what work was being done to prepare for any issues in relation to recruitment after Brexit. Members noted that a lot of work had been done to prepare nationally and that CCC had ongoing conversations with providers and that not all of the issues were Brexit related and capacity had actually grown by 12% in the domiciliary care market.

It was resolved unanimously to:

Consider the self assessment for Cambridgeshire Adult Social care and agree a public facing summary for inclusion on the Council website.

**148. ADULTS COMMITTEE REVIEW OF DRAFT REVENUE AND CAPITAL BUSINESS PLANNING PROPOSALS FOR 2019/20 TO 2023/24**

The Committee received a report that provided an overview of the draft Business Plan revenue and capital proposals in the remit of the Adults

Committee.

In considering the report Members:

- Noted that the main change to the report since it was last at Committee in October was the increase of £1 million in the Better Care Fund.
- Queried how confident Officers were that the Adults Positive Challenge savings would be made. Members noted that a lot more work had been done since a report last came to Committee. A meeting with the Chair of the Committee, the Leader of the Council and the Chief Finance Officer had taken place and the investments had been agreed. There were 10 workstreams with detailed proposals. A trajectory had been developed to monitor the programme. The savings would be stretching and would need to be reviewed on a regular basis in terms of phasing. .
- Discussed whether the investment of MRP savings would be deferred. Members noted that the local government settlement was being announced that day and this would be clarified as part of the settlement.
- Queried whether the action in the business case on page 105 of the papers had been positive in terms of moving away from institutionalised care. Officers agreed to provide a brief to Members. **ACTION**

It was resolved unanimously to:

- a) note the overview and context provided for the 2019/20 to 2023/24 Business Plan revenue proposals for the Service, updated since the last report to the Committee in October.

It was resolved by majority to:

- b) comment on the draft revenue savings proposals that are within the remit of the Adults Committee for 2019/20 to 2023/24, and endorse them to the General Purposes Committee (GPC) as part of consideration for the Council's overall Business Plan.
- c) comment on the changes to the capital programme that are within the remit of the Adults Committee and endorse them to the General Purposes Committee (GPC) as part of consideration for the Council's overall Business Plan.

## **149. FINANCE AND PERFORMANCE REPORT – OCTOBER 2018**

The Committee received the October 2018 iteration of the Finance and Performance report. In presenting the report it was noted that People and Communities at the end of October forecasted an overall overspend of £4m which was an increase from a forecast £2.7 m overspend in September.

Specifically for lines relating to Adults Committee, the forecast for October was



an overspend of £175k, which was a marginal improvement from the £206k overspend forecast in August.

In considering the report Members:

- Noted that the cause of the overspend had remained unchanged from last month principally being the pressures on care spend within Learning Disability and Older People's services as well as a slower than anticipated delivery of certain savings programmes. These pressures had been partially mitigated by the application of funding of a further £150k had been applied in October to mitigate the increased forecast overspend as Winter approached.
- Noted that that there had been further progress on the red indicator for proportion of adults with a primary support reason of learning disability support in paid employment. All reviews were due to be completed by the end of March and the percentage in employment would then rise significantly.
- Welcomed the overall budgetary control but noted that there would be increased pressures particularly over the winter period particularly in relation to nursing where cost pressures are expected.
- One member queried whether, if the revenue grant was deferred, would an increase in Council tax be looked into?. Members noted this was one of many different factors that would need to be taken into account.

It was resolved unanimously to review and comment on the report.

#### **150. AGENDA PLAN, APPOINTMENTS AND TRAINING PLAN**

Members requested interim updates on the Adults Positive Challenge Programme the Neighbourhood Cares Pilot. Members agreed that seminars on both subjects would be appropriate. Officers agreed to review whether the reserve dates for Committees in February and April could be used for this purpose. **ACTION**

Members noted the updated training plan.

#### **151. DATE OF NEXT MEETING**

Members noted the date of the next meeting as Thursday 10 January 2019.

**Chair**



## ADULTS COMMITTEE

### Minutes Action Log



**Agenda Item No: 2a**  
**Cambridgeshire**  
**County Council**

#### Introduction:

This log captures the actions arising from the Adults Committee up to the meeting on **13 December 2018** and updates Members on progress in delivering the necessary actions.

This is the updated action log as at 21 December 2018

#### **Meeting of 6 September 2018**

Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
108.	<b>Willow Court Bassenhally, Whittlesey - Tender for Contract</b>	<b>Lynne O'Brien</b>	Brief Committee on the outcome of the tender process once completed via email.	Tender documentation being finalised.	<b>Ongoing</b>	<b>By March 2019</b>

#### **Meeting of 18 October 2018**

Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
117.	<b>Alignment of Extra Care Contract</b>	<b>Lynne O'Brien</b>	The Committee requested that an update on the timings for the visioning strategy should come back to Committee, along with the project plan.	Further work required before project plan can be finalised.	<b>Ongoing</b>	<b>By January 2019</b>

Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
123.	<b>Learning Disability Employment Strategy Update</b>	<b>Amanda Roach</b>	Requested more information on how this would affect peoples' care package costs.	Figures are being worked up with Finance colleagues	<b>Ongoing</b>	<b>01.02.2019</b>
		<b>Amanda Roach</b>	Highlighted the need to do more work on transitioning from voluntary to paid employment. It was noted that the authority were keen to work with the Department of Work and Pensions on this and were looking to hold workshops to explain what could happen in terms of benefits. It was noted that this would be included in the action plan.	Information to be collated with the Council's benefit team and from the DWP. Fact sheets to be available for service users, social workers and families/carers. Information to be incorporated into relevant web pages for easy access.	<b>Ongoing</b>	<b>31.05.2019</b>

#### Meeting of 13 December 2018

Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
146.	<b>Winter Pressures and Additional Public Funding</b>	<b>Will Patten</b>	Members requested that the DTOC dashboard be circulated to the Committee on a monthly basis.	Committee members have been added to the monthly distribution list.	<b>complete</b>	

Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
147.	Cambridgeshire County Council – ADASS Regional Self Assessment		Members queried a point on the slide (page 56 of the papers) outlining where Cambridgeshire was doing better than national /regional average, 'Permanent admissions to care homes'. There was a need to clarify that this meant that permanent admissions were low.	Amended to reflect that – CCC has lower rate of permanent admissions to care homes for older people than England average.	Complete	
			Members queried the examples of best practice on page 46 of the papers and asked for them to be simplified.	Wording reviewed and simplified	Complete	
			Requested some simple metrics be added to the presentation in the performance section.	A number of metrics have been slotted in to the slide – alongside better description of why good / requiring improvement	Complete	
			Requested that on the voluntary sector slide, (page 52 of the papers) the wording was made clearer.	Slide simplified and neighbourhood cares pilots emphasised.	Complete	
			Requested that the Neighbourhood Cares Pilot be highlighted in the presentation.	Neighbourhood cares is now better highlighted throughout	Complete	
			Requested that on the 'Areas for improvement' slide the word 'both' should be removed.	Word "both" removed.	Complete	

148.	Adults Committee review of Draft Revenue and Capital Business Planning Proposals for 2019/20 to 2023/24	Will Patten	<p>Members queried whether the action in the business case on page 105 of the papers had been positive in terms of moving away from institutionalised care. Officers agreed to provide a brief to Members.</p>	<p>The move to supported living setting has had a huge positive impact on people from restricted, traditional institutionalised care models. In all the cases when compared to their residential services, the service users are receiving more dedicated support and care, greater rights as tenants, a schedule of support tailored to their needs, more disposable income whilst at the same time costing less to the adults social care budget. All the providers in question are also satisfied with the change. A one year on follow up will take place in March 2019 to ascertain if we have maintained that level of satisfaction. Several new schemes are to start in the new year as the due diligence process is carried out on these schemes and best interest decisions for the people concerned come to a satisfactory outcome.</p> <p>Below is a summary of the work carried out thus far.</p> <p>To date we have completed work in:</p> <ul style="list-style-type: none"> <li>• Rosebud (Mencap) [6 people +1 Norfolk +1 Suffolk]</li> <li>• Teversham Road (Avenues East) [3 people]</li> <li>• Thomas Road (Avenues East) [3 people]</li> <li>• High Road (Voyage Care) [6 people]</li> </ul>	Complete	
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				<p>After six months from the change, of the 18 tenants in question:</p> <ul style="list-style-type: none"> <li>representatives state 16 are satisfied with the result,</li> <li>1 family is reserving judgement and wants more time for changes to settle, and</li> <li>1 family confirming this is the best move ever for their sister.</li> </ul>		
Minute No.	Report Title	Action to be taken by	Action	Comments	Status	Review Date
150.	Agenda Plan, Appointments and Training Plan	Charlotte Black	Members requested interim updates on the Adults Positive Challenge Programme the Neighbourhood Cares Pilot. Members agreed that seminars on both subjects would be appropriate. Officers agreed to review whether the reserve dates for Committees in February and April could be used for this purpose.	<p>Updates to Committee on Adults Positive Challenge and Neighbourhood Cares have been added to the forward plan.</p> <p>Arrangements are being made for the member seminars on Adults Positive Challenge Programme and Neighbourhood Care Pilot</p>	Complete	





**CARE HOMES DEVELOPMENT WORK STREAM 2 TO COMMISSION NEW BLOCK CONTRACTS**

*To:* **Adults Committee**

*Meeting Date:* **10 January 2019**

*From:* **Executive Director: People and Communities**

*Electoral division(s):* **All**

*Forward Plan ref:* **2019/018** *Key decision:* **Yes**

*Purpose:* **To seek approval for recommended approach to increase care home capacity under Work Stream 2 of the Care Homes Development Programme**

**To provide an update on the Competitive Dialogue process under Work Stream 3 of the Care Homes Development Programme including C&I Committee approval for the first development site**

*Recommendation:* **1. Adults Committee is asked to approve the recommended commissioning approach to secure new care home capacity via block contract arrangements.**

**2. Adults Committee is asked to delegate authority to award contracts to successful providers to the Joint Commissioning Board.**

<b><i>Officer contact:</i></b>		<b><i>Member contacts:</i></b>	
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## 1. BACKGROUND

- 1.1 The Care Homes Development Project was launched in 2017 and is part of the Older People's Accommodation Strategy. The focus of the project is to address the current and future requirements for residential, residential dementia, nursing and nursing dementia care provision in the short and longer term across Cambridgeshire. The project has three Work streams:
- Work stream 1 to increase current block bed provision which could be available by May 2018, subject to Committee approval. **(Work Stream Completed)**
  - Work stream 2 to incentivise the market to extend or build on their own land to increase capacity with a focus to increase capacity.
  - Work stream 3 to secure a strategic partner to build and run care homes on council owned land meeting the longer term needs of the market and Cambridgeshire residents.
- 1.2 At present, we have a projected shortfall of 450 high quality affordable beds across the market. 150 of these beds are required to be affordable and sustainable directly commissioned by the Council, and the remainder 300 to be available to the self-funder market.
- 1.3 Under Work stream 1 the existing seven block bed providers were asked to inform CCC of additional capacity that could be commissioned to meet the shortfall across the county. Through this work, we have managed to gain 39 additional residential units (21 Residential and 18 Nursing) in Cambridge City and South Cambridgeshire by extending existing contracts.
- 1.4 Whilst work stream 1 has been successful in relieving some of the pressure in Cambridge and South Cambridgeshire, we still have an immediate shortfall of 111 units across East Cambridgeshire, Huntingdonshire and to a lesser extent, South Cambridgeshire.
- 1.5 **Update on Competitive Dialogue process under Work Stream 3 of the Care Homes Development Programme including C&I Committee approval for the first development site**

On the 23<sup>rd</sup> November 2018, Commercial and Investment Committee recommended that a development site of Council owned land at Slade Farm, Burwell, East Cambridgeshire can be used for the next stage of the procurement process.

Once a decision has been made about the preferred specific site within the wider development, this site will be put forward to the remaining bidders in the Invitation to Submit Detailed Solution (ISDS) stage of the competitive dialogue process whereby bidders will produce a detailed business case of their suggested approach to developing the first home on this site.

Evaluation of bids will take place in February and March 2019

## **2. RECOMMENDED APPROACH AND COST IMPLICATIONS**

- 2.1 It is recommended that under Work Stream 2 of the Care Homes Development Project, we carry out an open tender procurement exercise to increase capacity by the remaining 111 units required. These units are additional to the 150 affordable units that will be secured in the long-term (within 5 years) via Work Stream 3 using a competitive dialogue to secure a strategic partner.

We do not believe that increasing capacity by 111 in the short term as well as increasing by a further 150 in the longer term will leave us with an over-provision of services due to the fact that the vast majority of current residential care placements are spot purchased. Therefore if demand does not increase to the level that is expected, we will use block contracted units to;

- Reduce usage of spot purchased provision
- Increase provision of interim residential care between a hospital admission and return to home
- Increase provision of residential carer respite support.

To develop our estimate of the requirement for residential and nursing beds by the Council, we used a model<sup>1</sup> produced by the Housing Learning and Improvement Network which supports commissioners with producing accommodation and care strategies for older people.

The model takes the estimated prevalence of cognitive impairment, personal care difficulties, mobility problems and difficulties with domestic tasks, and combines them with population forecasts (of numbers of 75+ year olds), to arrive at an estimated number of required places.

It allows for an increase in the number of people making use of alternatives to residential and nursing care such as extra care or home care, and an increase in the need for nursing care specifically in comparison to residential care. We used local figures and made some adjustments to ensure it fitted the local market.

This included a broad assumption that the Council purchases about 1/3 of the beds available in the market. We also triangulated the results by comparing to internal data about service users' initial placement requirements and preferences, and where they ultimately ended up being placed, in order to test the model's conclusions about pressure points in the market for the Council's purchasing specifically.

Although work stream 2 intends to increase capacity in the short to medium term, for the majority of providers there is expected to be a period of planning and building work that will be required to increase capacity. Therefore, we intend to allow for this in contract duration and we expect service mobilisation could take up to 18 months from contract award date

### **2.2 Recommended Breakdown of Remaining 111 Units Required:**

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<sup>1</sup> <https://www.housinglin.org.uk/Topics/type/More-Choice-Greater-Voice-a-toolkit-for-producing-a-strategy-for-accommodation-with-care-for-older-people/>

The table below sets out our recommended approach for how the 111 remaining units should be split by type and area. This approach has been modelled using data provided by Cambridgeshire Business Intelligence Team which highlights that our biggest need is for Nursing care across East Cambs and Hunts whilst still taking into account that there is a requirement to procure some additional Residential Dementia capacity.

Area	Type	Number of Beds required
<b>East Cambridgeshire</b>	Residential	0
	Residential Dementia	10
	Nursing	23
	Nursing Dementia	15
<b>South Cambridgeshire</b>	Residential	0
	Residential Dementia	5
	Nursing	5
	Nursing Dementia	5
<b>Huntingdonshire</b>	Residential	0
	Residential Dementia	10
	Nursing	23
	Nursing Dementia	15
	<b>Total Requirement:</b>	<b>111</b>

### 2.3 Pricing Structure

We are currently working on our pricing strategy to ensure best value for money for the council whilst still affordable for providers. However, **Committee are asked to approve** that new block contracts are put out to tender with a maximum price ceiling set at current average block weekly rates or lower.

### 2.4 Commissioning Approach

Following advice from Members and Senior Managers, it is recommended that the council carries out a procurement exercise in order to achieve an increase in care home capacity in East Cambridgeshire, South Cambridgeshire and Huntingdonshire.

It is recommended that the required capacity required is split into the following Lots for tendering purposes:

Lot	Area	Type of Provision and Amount
1	South Cambs	Residential Dementia – 5 beds
2	South Cambs	Nursing – 5 beds
3	South Cambs	Nursing Dementia – 5 beds
4	East Cambs	Residential Dementia – 10 beds
5	East Cambs	Nursing – 23 beds
6	East Cambs	Nursing Dementia – 15 beds
7	Huntingdonshire	Residential Dementia – 10 beds
8	Huntingdonshire	Nursing – 23 beds
9	Huntingdonshire	Nursing Dementia – 15 beds
		<b>Total - 111</b>

We intend to use a flexible approach when awarding Lots to successful providers in order to maximise new block capacity. This will mean that if no one provider or group of providers can fulfil the total number of beds required in a Lot, they will still be awarded a contract to deliver the provision that they can provide.

It is our intention that for each Lot, the top scoring bidder will be awarded the maximum amount of beds that they can offer and then bidders will be awarded the beds that remain in the Lot based on their score and the range of units they can offer until all beds can be delivered.

We intend all bidders to state a minimum and maximum amount of beds they can offer when tendering for a Lot. This will increase the ability for us to procure the capacity that we require.

It is recommended that an Open Tender Process is carried out to procure Residential Dementia, Nursing and Nursing Dementia provision.

This approach will:

- Maximise the number of providers across services that could potentially be awarded and sustained for the duration of the contract.
- Include clearly defined price categories that remain stable.
- Include early defined method statements and outcomes to minimise resource input from CCC and provider market to maximise uptake.
- Enable maximisation of lessons learnt from the competitive dialogue process within Work Stream 3 and minimisation of duplication of work.
- Offer stability to the county council and market for the duration of the contract with the potential to extend if mutually agreed.

## 2.5 High-Level Procurement Timeline

The timeline below intends to enter into new contractual arrangements as soon as possible whilst allowing the time required to carry out an open tender approach:

Activity	Timescales
Tender Goes Live	04/02/2019
Tender Return Deadline	11/03/2019
CCC Panel Evaluation and Moderation	15/03/2019 – 03/04/2019
Approval to Award (Seek JCB Delegated Approval)	26/04/2019 – 10/05/2019
Contract Start Date	01/07/2019
Service Mobilisation	01/07/2019 – 01/01/2021 (This will depend on individual circumstances)

## 2.6 **Contract Length**

We intend to award contracts to service providers for a total potential term of **15 years**. This will be made up of an initial term of **5 years** with discretionary extension periods of **5+2+2+1 years**. We believe that awarding contracts for this length of time will allow for providers to carry out planning and building work during the first part of the contract (could be up to 18 months) and the remaining period of the contract will increase providers return on investment whilst achieving good value for money for the Council.

## 2.7 **Contract Flexibility and Commissioning Models**

Due to the proposed length of these contracts, it is recommended that within the terms and conditions of the contract, we ensure we present clear variation and exit clauses to safeguard the Council and Residents.

Furthermore, to ensure delivery of outcomes and financial sustainability for the Council, there is a need to consider and incorporate new models of commissioning and care. Care Suites is an example of a new model which has been implemented within the Sussex area. Care Suites is a model of 24 hour residential care which continues to deliver outcomes for residents requiring this level of support, but offers the Council a more sustainable model of funding and provides residents with self-contained apartment type accommodation.

However, this model does impact on the level of welfare and housing support currently claimed from District Councils and their engagement and support is therefore critical.

We will ensure that providers understand the need to demonstrate flexibility through the tender documentation, process and subsequent terms and conditions within the contract.

## 2.8 **Service Mobilisation**

Due to building works being required in order for providers to offer additional capacity, following contract awards, a period of planning, works and mobilisation will be required.

Depending on how far providers are in the process in gaining planning permission and carrying out building work, service mobilisation could take anywhere from 6 to 18 months. Therefore, within the tender and contract documentation, we will state that providers will be required to deliver a service no more than 18 months from the contract start date. Block contract funding will not be released until we receive assurance that the first residents can begin to receive a service.

We recommend that a clause within the contract reserves the right for the council to end the contract if progress against implementation plans and timescales is unsatisfactory and leads to a delay in bed availability over and above the 18 months.

In order to monitor progress against implementation plans, resource from Contract Management and potentially CCC Property Services will be required with clear KPIs in the contract.

## 2.10 Council Loan

There is the ability for the Council to offer service providers a loan in order for them to carry out necessary building work required to increase capacity within their homes. This would offer providers a potentially advantageous interest rate in comparison to private lenders and offer the council an income stream. However, when viewing the advantages against the disadvantages of this (as detailed below) and the tight timescales involved in this work, we are currently unsure whether this should feature in the commissioning approach.

### Advantages:

- Potential for providers to offer a more affordable service cost to the council due to a more affordable interest rate on the loan.
- Income stream for the council.

### Dis-advantages:

- If we offer a loan to providers and the ability for them to provide the service relies on securing the loan, providers may have to drop out of the process if unsuccessful in securing the loan. This may mean that another provider who did not score as highly has been knocked out of the process but could have offered the beds needed.
- Offering a loan at a different rate depending on the providers credit rating may create an un-level playing field in the procurement process.
- If we offered providers a loan at a consistent interest rate, it is likely that this rate would be very similar to other financial institutions and therefore not create a competitive prospect for the provider.

## 3. ALIGNMENT WITH CORPORATE PRIORITIES

### 3.1 Developing the local economy for the benefit of all

Increasing block contract capacity in the care home market will lead to an increase in employment for local care workers.

### 3.2 Helping people live healthy and independent lives

Extending existing care home provision will enable the Council to provide individuals with more choice and control over arrangements to meet their long term ongoing needs within high quality settings.

### 3.3 Supporting and protecting vulnerable people

In procuring additional capacity for residential care settings, we will ensure that successful providers display robust safeguarding arrangements to ensure that residents are kept safe.

In addition to this, through contract management and quality assurance, we will monitor service provider compliance with safeguarding policies and procedures.

#### **4. SIGNIFICANT IMPLICATIONS**

##### **4.1 Resource Implications**

The report above sets out details of significant cost implications in *section 2.6*

##### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

The report above sets out details of significant procurement/contractual implications in *sections 2.5, 2.6, 2.7 and 2.8*

##### **4.3 Statutory, Legal and Risk Implications**

*There are no significant implications in this category*

##### **4.4 Equality and Diversity Implications**

*There are no significant implications in this category*

##### **4.5 Engagement and Communications Implications**

*There are no significant implications in this category*

##### **4.6 Localism and Local Member Involvement**

*There are no significant implications in this category*

##### **4.7 Public Health Implications**

*There are no significant implications in this category*



<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	Yes Name of Officer: Stephen Howarth
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	Yes Name of Officer: Paul White
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	Yes Name of Officer: Fiona McMillan
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	Yes Name of Officer: Wendi Ogle-Welbourn
<b>Have any engagement and communication implications been cleared by Communications?</b>	Yes Name of Officer: Matthew Hall
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	Yes Name of Officer: Wendi Ogle-Welbourn
<b>Have any Public Health implications been cleared by Public Health</b>	Yes Name of Officer: Tess Campbell

<b>Source Documents</b>	<b>Location</b>
N/A	N/A



**DISCHARGE AND TRANSITION CARS REPORT**

**To: Adults Committee**

**Meeting Date: 10<sup>th</sup> January 2019**

**From: Executive Director, People & Communities: Wendi Ogle-Welbourn.**

**Electoral division(s): All**

**Forward Plan ref: 2019/019                      Key decision: Yes**

**Purpose: To extend the current Discharge & Transition Cars block contract for 7 months and 3 days to allow for a re-procurement exercise to take place. This will ensure we continue to alleviate the lack of homecare capacity and support Delayed Transfer of Care (DTC).**

**Recommendation: The Committee is asked to approve:**

- a) The exemption that will allow extension of the existing Discharge & Transitions Cars contract for a further 7 months & 3 days – This will mean the new contract can start on a Tuesday rather than on a weekend.**
- b) The commencement of a new procurement exercise for the Discharge and Transition cars to ensure the council remains compliant with procurement regulations.**
- c) To delegate authority to the Executive Director for People & Communities to approve the award of the new contract once the tender exercise is completed.**

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## **1. BACKGROUND**

- 1.1 Cambridgeshire County Council currently commissions 23 Discharge and Transition Cars under a block arrangement to support discharge from hospital where mainstream homecare providers cannot be identified and as a transition on exit from reablement to mainstream homecare. The cars are currently commissioned on variable weekly rates for a variable number of hours. The number of Discharge Cars were rationalised from 26 down to 23 since November 2017 to ensure optimal utilisation.

This Service aims to provide a short term transition service for up to three weeks until long term, mainstream support can be sourced and put in place. The service is delivered through car rounds and provides short term support to:

- People being discharged from an acute hospital for up to three weeks with a view to supporting their transition into mainstream homecare where ongoing homecare support is required.
- People who have completed a period of Reablement and are identified as requiring ongoing homecare support, for up to three weeks with a view to supporting their transition into mainstream homecare.

The existing contract expired on 30th October 2018 but pressures within the homecare market including a number of providers handing back a significant number of care packages meant resources needed to be diverted to managing service continuity for our service users. Therefore the Council has been spot purchasing these contracts for this interim period.

## **2. MAIN ISSUES**

- 2.1 The current contract was let for a period of one year only (1st November 2017 – 31st October 2018) with no provision for extension. This now means the contract came to an end on 31st October 2018. The current contract was let for a period of one year with the intention of jointly commissioning provision with the CCG and to deliver a more efficient and integrated service, However the CCG did not complete their procurement process and are currently not in a position to jointly procure this services.

As at w/c 6<sup>th</sup> November 2018 there were 825 weekly hours underutilised on the council's block cars. This equates to a weekly occupancy level of around 60%. The maximum available weekly hours from the 23 cars is 2093 at 13 hours per car and we were utilising a total of 1247.75. Whilst this tells us we need to improve upon our use of the cars through regular rationalisation of care packages involving the three block car providers, it also informs us of our position at this stage of winter pressures. Current utilisation and key trends demonstrates that there is clear opportunity to prepare capacity to respond to urgent demand and periods of escalation across the system. One key trend that has emerged is the fact that the cars are used less for lunch and tea time calls.

At the time of writing this report the cars occupancy level have increased to 75%. At 75% utilisation the cars are deemed to be working well as the other 25% is accounted for in travel time and the fact that providers are at the mercy of wherever service users live

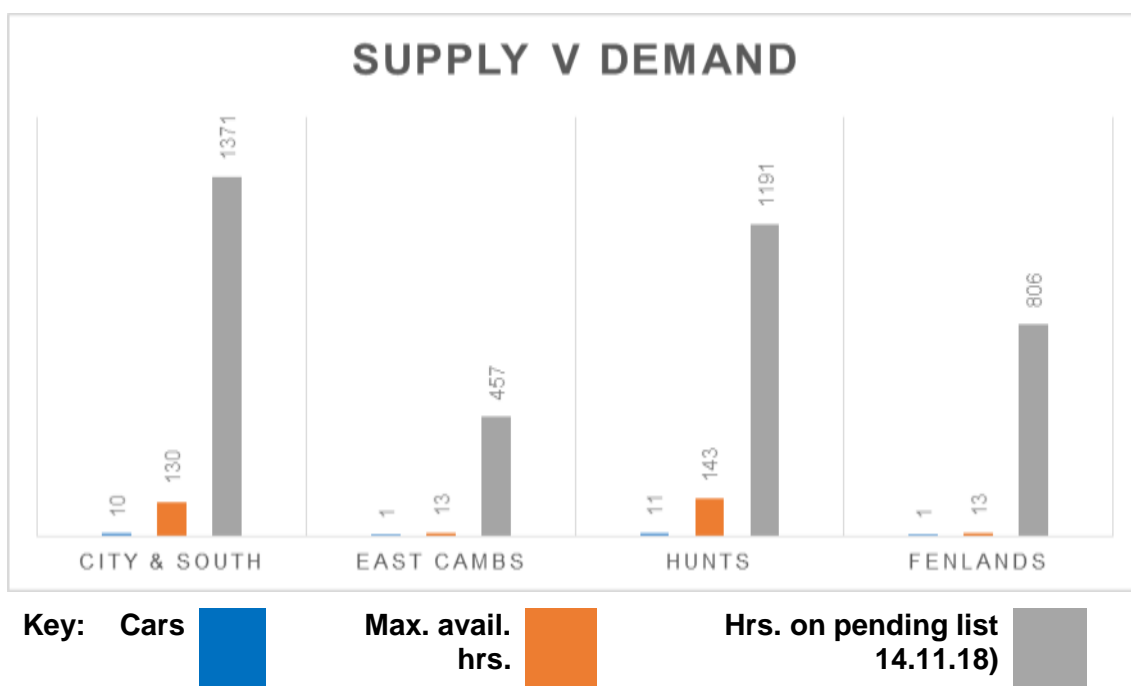
within the county when considering now to make up call rounds (it is not guaranteed that all clients will live in the same areas to support easy fill up of the cars). It is important to note that these cars are unlikely to achieve in excess of 75% occupancy due to the travel time required to provide the care.

Geographical distribution of the cars -

Current cars geographical distribution vs. Current demand			
Provider	Location	Nos. of Car	Max. Hours available
Westminster	City & South	4	52
Radis	City & South	3	39
Beaumont	City & South	3	39
Radis	East Cambs	1	13
Radis	Fenlands	1	13
Westminster	Hunts	5	65
Radis	Hunts	4	52
Beaumont	Hunts	2	26
Total			299

Demand vs supply of the cars -

Area	Nos. of Cars	Max no.of available hours	Hours Demand (Pending list) as at 14.11.17	Care packages Demand (Pending list) as at 14.11.18	Percentage of demand being met by cars as at 14.11.18
City & South	10	130	1371	138	9.5
East Cambs	1	13	457	38	2.8
Hunts	11	143	1191	115	12.0
Fenlands	1	13	806	64	1.6
Totals	23	299	3825	355	25.9



Based on the fact that a larger number and percentage of the cars are already located and serving areas of the county where the demand is largest as shown from a snapshot of the pending list it is recommended that the geographical distribution of the cars remains unchanged and careful thought needs to be taken to ensure the supply of car continues to reflect local demand.

Also, discussions with our brokerage team have taken place to identify the pressure areas of the county for hospital discharges and for sourcing of mainstream homecare package and this has confirmed that the current location of the cars matches where the demand appeared to be greatest.

In order to optimise utilisation of the cars all 3 block car providers have been given the go ahead to arrange three-weekly rationalisation meeting. The lead provider arranging these meeting is Westminster Homecare and CCC brokerage also attends. The Lead Commissioner for Homecare is also invited to these meetings as required.

### 3. ALIGNMENT WITH CORPORATE PRIORITIES

#### 3.1 Developing the local economy for the benefit of all

The following bullet points set out details of implications identified by officers:

- This contract enable the providers to employ their care staff on contracted hours as the block contract enable them to better plan their resources.
- All 3 existing service providers deliver homecare services in 2 or more districts of the county.
- The service is being delivered countywide
- The Discharge and Transition cars service support the rapid discharge of vulnerable service users from hospital and reablement back to their own homes

and by so doing plays a significant role in keeping the discharge pathway fluid.

### **3.2 Helping people live healthy and independent lives**

The report above sets out the implications for this priority in paragraph 2 of section 1.1.

### **3.3 Supporting and protecting vulnerable people**

The Discharge and Transition cars service provides the availability of homecare to support independent living for some of the most vulnerable members of society.

## **4. SIGNIFICANT IMPLICATIONS**

The extension of the existing Discharge and Transition cars contracts will provide the Council with an opportunity to review current provision and reconfigure the service, if this will improve the service and the quality of independent living for older people.

The extension of the service will also ensure that the council continues to alleviate the winter pressures it faces with the ongoing need for home care provision to support Delayed Transfers of Care (DTC) at a time when the hospital and services are under what is arguably the most pressure.

### **4.1 Resource Implications**

The following bullet points set out details of significant implications identified by officers:

- The tender process for this contract will require significant officers' time but is a necessity to ensure we remain compliant with procurement regulations.
- Starting the re-procurement of this contract in March 2019 may mean we are able to better manage disruption to the existing service during the winter pressure month. It will also mean we can manage possible transition of the service to alternative providers during the summer months in preparation for the following winter pressures.

The retender in November 2017 saved £270k against the full-year budget for the service.

Extending the contracts at current values will not result in additional spend over the agreed annual budget for the service.

The value of the new 4 year contract will be £9,090,532 (approximately £9M).

### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

The existing contract expired on 30<sup>th</sup> October 2018 but pressure within homecare market including a number of providers handing back a significant number of care packages meant resources needed to be diverted to managing service continuity for our service users. This in turn led to the delay in reporting to Adults Committee.

It is recommended that the new contract should have a contract duration of 2 year with 2 years extension provision, extendable in one year blocks (2 + 1 +1) subject to

satisfactory performance of the provider and ongoing availability of funding. It will have all the necessary contract terms and conditions that manages the council's risk exposure.

"Transfer of Undertakings (Protection of Employment) regulations 2006" (TUPE) - LGSS Procurement have informed us that TUPE is likely to apply due to the fact that the providers recruited contracted staff specifically to work on this service. Ultimately, any outgoing provider will need to consider the application of TUPE. The council usually gives then 28 days for provider to complete TUPE paperwork and this is incorporated in the indicative procurement timelines. We may be able to negotiate with the current providers to work with less than 28 days.

Benchmarking to obtain best value:

Internal benchmarking – There is no other internal service akin to Discharge & Transition cars.

Competitive benchmarking – Our CCG colleagues are still in the process of deciding if they will go out to procurement for block cars but not ready to start a procurement process at this point.

Contract negotiation:

All of the three existing Discharge and Transition cars providers are able and willing to continue delivering the serviced for the period of the tender process and up until the award of the new contracts. The Terms and Conditions of the contract will remain unchanged during the extension period.

Soft market testing:

Discussions with a number of different home care provider has revealed that the Discharge and Transitions cars service is one that attracts keen interest as providers have said that it enables them to offer contracted hours to care staff thus assuring us that the capacity is available for the Council to use.

LGSS procurement has provided us with the following indicative procurement timeline.

Action	Start date
Procurement commencement	08/02/2019
Contract Award	10/05/2019
Contract starts	01/06/2019

By going out to tender for a new contract CCC will have the opportunity to further engage our locality operational team with a view to reviewing the outcomes we expect future car providers to deliver.

#### 4.3 Statutory, Legal and Risk Implications

The delivery of homecare service is considered to be the council's statutory obligation under the Care Act 2014.

LGSS Law have advised that provided that the extension of the existing contracts and the reprocurement of the new contract follows a regulated procurement process, legal risks are likely to be low.



#### 4.4 Equality and Diversity Implications

The following bullet points set out details of significant implications identified by officers:

- The Discharge and Transition Cars will continue to alleviate the ongoing demand for mainstream homecare services across the county and will continue to meet the need of all resident in Cambridgeshire.

#### 4.5 Engagement and Communications Implications

The following bullet points set out details of significant implications identified by officers:

- All of the three existing Discharge and Transition cars providers have confirmed that they are willing to continue delivering the service for the period of the tender process and up until the award of the new contracts. The Terms and Conditions of the contract will remain unchanged during the extension period.
- All provider on our existing Home and Community Support framework will be informed and given the opportunity to tender for the new contract.

#### 4.6 Localism and Local Member Involvement

There are no significant implications for this priority.

#### 4.7 Public Health Implications

- There is an evidence base that suggests that timely intervention through homecare in the community can improved health outcomes and the quality of life for older people. It can also avoid premature admission to residential home and overstay in hospitals.

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Name of Financial Officer: <b>Stephen Howarth</b>
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?	Yes Name of Officer: <b>Paul White</b>
Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	Yes Name of Legal Officer: <b>Richard McAdam</b>

Have the equality and diversity implications been cleared by your Service Contact?	<b>Yes</b> Name of Officer: <b>Will Patten</b>
Have any engagement and communication implications been cleared by Communications?	<b>Yes</b> Name of Officer: <b>Matthew Hall</b>
Have any localism and Local Member involvement issues been cleared by your Service Contact?	<b>Yes</b> Name of Officer: <b>Will Patten</b>
Have any Public Health implications been cleared by Public Health	<b>Yes</b> Name of Officer: <b>Tess Campbell</b>

Source Documents	Location
<i>None</i>	

**REVIEW AND REDESIGN OF OLDER PEOPLE'S DAY OPPORTUNITIES**

*To:* **Adults Committee**

*Meeting Date:* **10 January 2019**

*From:* **Executive Director: People and Communities**

*Electoral division(s):* **All**

*Forward Plan ref:* **N/A** *Key decision:* **No**

*Purpose:* **To outline recommended approach to review and redesign older people's in-house and externally commissioned day opportunities in Cambridgeshire and Peterborough**

*Recommendation:* **Committee is asked to approve the approach towards reviewing and redesigning in-house and externally commissioned older people's day opportunities in Cambridgeshire and Peterborough**

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## **1. BACKGROUND AND MAIN ISSUES**

- 1.1 The Commissioning Directorate alongside Operational Social Care teams seek approval from Adults Committee to review and redesign in-house and externally commissioned Older People's Day Opportunities

Cambridgeshire County Council (CCC) funds a total of 30 older people's day services across the county offering a service to approximately 392 older people who have either been assessed as eligible by CCC and as such have been referred to the service to help meet their needs as set out in their care and support plan (126 people) or are unknown to the council (266 people). This amounts to an annual spend of £761,307. The day services are attended by older people, older people with learning disabilities and older people at various stages on their journey with dementia.

An initial review into day services has been undertaken due to the following reasons:

- Operational colleagues have highlighted that in many cases, the services are not meeting the needs and wants of their service-users and as such, are not well used by clients supported by Older People's Locality Teams.
- Services have not been reviewed in recent years to ascertain utilisation, outcomes delivered and value for money.

### **Adults Positive Challenge Programme**

A key theme of the Adults Positive Challenge Programme is to review funded services that may prevent the need for ongoing social care in order to clearly define the outcomes that are expected from these services and rationalise ongoing funding.

Older people's day opportunities, in many cases, provide support around reducing social isolation for older people and respite for their carers when they have not reached eligibility for ongoing social care support. Therefore, it is recommended that low-level, volunteer delivered older people's day services are reviewed alongside this programme.

### **Think Communities**

Alongside the Adults Positive Challenge Programme, the Communities and Safety Directorate are leading a system-wide approach to prevention which is called the Think Communities approach.

This approach looks to work in a place-based way to;

- Empower and enable communities to support themselves, encouraging community-led solutions and interventions.
- Work with communities to harness their capacity targeted towards those requiring the most help.
- Support communities to play a clear and evidence role in preventing, reducing or delaying the need for more costly public services.
- Align resources to create multi-agency support which can flexibly meet the

- changing needs of our communities.
- Be experimental in the approach in order to deliver individual solution and support ideas that can be replicated.

As many of the Older People's Day Opportunities are delivered in a place-based way, relying on local volunteers and committees, it is suggested that this work is fully aligned to the Think Communities approach.

## 1.2 Statutory Guidance

It is our understanding that the Care Act 2014 does not explicitly require the provision of day services for eligible adults. However, there are a number of elements of the Act that highlight the need to support somebody's sense of wellbeing. It has become clear that, for those who use day services, their wellbeing is improved as a result in the majority of cases.

The Care Act 2014 (<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>) states that "...Local authorities must promote wellbeing when carrying out any of their care and support functions in respect of a person..." ("the wellbeing principle").

The Care Act 2014 also places a duty of Local Authorities to:

- Promote the wellbeing not only of those with eligible needs but also of those that come into contact with the system in some other way.
- Consider "the wellbeing principle" when it undertakes broader, strategic functions, such as planning, which are not in relation to one individual. As such, wellbeing should be seen as the common theme around which care and support is built at local and national level.

Another key principle within the Care Act requires Local Authorities to consider "The importance of preventing or delaying the development of needs for care and support and the importance of reducing needs that already exist."

The prevention of service users (including carers), becoming isolated, missing out on socialising and risk of carer and cared for relationship breakdown due to fatigue supports the need for ongoing provision of day opportunities in some guise.

From our review of the Care Act 2014, it is our understanding that current funding for older people's day services represents a 'preventative spend' rather than a statutory service.

## 1.3 Initial Review Key Findings

The key outcomes being delivered by older people's day services are:

- Reducing social isolation and loneliness for older people.
- Providing respite for unpaid carers thus supporting them to fulfil their caring role.

The initial review of services has found that:

- All services have experienced a reduction in referrals from Older People's Social Care Teams.
- Some services are well used on a private basis by older people in the community.
- Most of the services fill their spaces through word of mouth (carers & family), and promote their services with local GPs, Library & other low-cost/no-cost methods of advertising.
- All of the day services were viewed by the clients that use them as essential to them, their carers and their local community.
- The majority of services rely on volunteers and CCC funding to deliver.
- Many services have clients with diagnosed or undiagnosed dementia.
- Services have a variety of transportation arrangements for their clients.

For a more in depth analysis of utilisation and service offer across current commissioned older people's day services, please refer to appendix 1.

#### 1.4 **Service Outcomes and Transport Issues:**

All clients that we spoke with during visits mentioned that the most important thing to them about attending a day service was that they could meet and speak with people.

Additionally, during a visit to St Neot's and District Day Centre, a group of carers spoke to us about how essential the service was for them in their ability to continue in their caring role.

There are a variety of other outcomes being delivered/supported by the services. These include but are not limited to;

- Provision of hot meals for those that are unable to cook.
- Memory and recollection activities for those with dementia or pre-dementia diagnosis.
- Healthcare needs supported, potentially resulting in reduced hospital admissions in some cases.
- Links to the wider community including nurseries, schools and other community groups.

The transport used to support older people to attend day services varies greatly between services. These include;

- Transport provided by the Day Service.
- Transport provided by an external company and funded by the Day Service.
- Council funded transport.
- Volunteer delivered transport.

A more detailed analysis of how transport is provided to support older people to attend day centres, how this is funded and where there is a cost to the council and how cost effective this is needs to be carried out.

## 1.6 **Support for those with Dementia:**

During our visits to day services, we asked service co-ordinators and staff about the amount of clients that they were supporting with some form of Dementia. To the best of their knowledge, across all of the services, they are supporting approximately 161 clients who either have a formal dementia diagnosis or are pre-diagnosis. It is currently unknown how many of these 161 are known by our social care teams

All services visited offer some level of support for those with dementia. This ranges from quizzes, music-based activities and other mental stimulation activities to one-to-one support for those with a higher level of need. The majority of services are unable to offer this higher level of support.

Through work carried out on the Cambridgeshire & Peterborough All Age Dementia Strategic Plan 2018 – 2023, and discussions with operational colleagues, it has been recognised that the current day opportunities available in Cambridgeshire for those with Dementia is not fully meeting the needs of those adults. It is unknown to what extent this is because professionals feel that provision cannot meet the needs of those that they support or individuals deciding not to use day services

It is recommended that a full needs analysis is carried out for this group of adults to ascertain the level of need and explore gaps in current provision and an options appraisal to determine the cost/benefit of targeting all or some of these resources at people living with dementia so that decisions about the future use of these services/the investment can be made.

## 1.7 **Views of Operational Social Care Colleagues**

Older People's Social Care operational colleagues have stated that they believe that a number of the day services are providing a good service to their local communities and some of the day services provided by care homes are able to support those with more complex needs.

However, there are some areas that have been highlighted as issues or where improvements would be required including;

- Many services are not equipped to support those with higher support needs.
- Many clients and their carers do not wish to use current day services due to the perception that they are traditional and boring.

- There is sometimes a lack of knowledge of what the services can provide – some kind of regular communication for social workers would be beneficial.
- Transport to say services can be fairly rigid in terms of pick up and drop off times and this doesn't always work well for them.
- Day Opportunities do not currently offer enough individual choice and control in terms of activities and support for clients.
- The increasing clientele of people with Dementia require a greater deal of specific support including mental stimulation than is currently on offer.
- There is a lack of provision for older male clients who generally do not wish to attend day services.

## **2. RECOMMENDED APPROACH**

### **2.1 Design Process Required to Develop Future Approach:**

At a time when we face significant financial pressures, we need to determine how we can support those with the greatest need alongside facilitating initiatives in communities that can evidence the prevention, reduction and delay of the deterioration of health and wellbeing in older people.

When taking into account the findings from the review, especially in relation to service utilisation and value for money it is apparent that a more robust needs assessment and service design exercise across wider stakeholders needs to be carried out in order to develop an approach that achieves better outcomes for service users and value for money for the Council.

A future approach may include (but needs further exploration):

- a. The use of direct payment for adults' day opportunities to ensure individual choice and control over what activities they engage in and when.
- b. The use of spot purchasing for adults day opportunities where client does not wish to receive a direct payment. This would ensure that we are only paying for what we are using.
- c. A certain level of building-based day services for those with more complex needs.
- d. The continuation of volunteer delivered, community day services/clubs for those with low needs where these organisations can achieve, with our support, greater financial sustainability.

In order to create consistency in our approach across Cambridgeshire and Peterborough, it is recommended that all activity is carried out across both areas to develop an approach that meets the needs of all service-users and both Councils in terms of value for money.



## 2.2 Co-design and Co-production with Service Users

We believe that the only way in which we can ensure we are best meeting the outcomes of service users and their carers is by co-designing and co-producing our approach with meaningful involvement from those with a lived experience.

The table below describes the proposed co-design activity needed to design our future approach and the timescales involved

**(timescales may have to flex if a procurement process is required):**

Activity	Timescales
Discovery; <ul style="list-style-type: none"><li>- Gathering inspiration and insights, identifying user needs and developing initial ideas.</li></ul>	January – March 2019
Defining; <ul style="list-style-type: none"><li>- Ideas are fleshed out in more detail and alignment with corporate priorities is explored.</li><li>- Approval of final approach (Joint Commissioning Board/Adults Committee)</li></ul>	March 2019 – May 2019
Developing; <ul style="list-style-type: none"><li>- Service development takes place in collaboration with service providers and stakeholders</li></ul>	May 2019 – July 2019
Deliver; <ul style="list-style-type: none"><li>- Services/initiatives are finalised and launched</li></ul>	July 2019 – September 2019

## 2.3 Exploring Future Approach for Low-level Community Based Day Opportunities

Although it has been recognised that our funding is needed to support those who are in receipt of ongoing care and support and their carers, it cannot be ignored that many older people who do not fall into the above category are currently accessing services.

These services may be providing valuable prevention and early intervention that reduces and delays older people requiring costly services.

It is proposed that these services are brought into a wider review of commissioned early intervention and prevention services being carried out within the **Adults Positive Challenge Programme**. This review will seek to define the outcomes that we desire from this kind of activity and will provide us with an approach to measuring services against these outcomes/criteria in order to prioritise our funding.

Bringing these services into this review will allow us to make a decision about the extent to which financial support is still provided to community-based, volunteer delivered day clubs.

As previously mentioned, As many of the Older People's Day Opportunities are delivered in a place-based way, relying on local volunteers and committees, it is

suggested that this work is fully aligned to the **Think Communities** approach.

## **2.4 Communication Strategy**

If Adults Committee approve our approach to redesigning older people's day services, it is important that we develop a robust communication strategy.

Any proposed change to current provision is highly likely to cause adverse media and political attention.

## **3. ALIGNMENT WITH CORPORATE PRIORITIES**

### **3.1 Developing the local economy for the benefit of all**

There are no particular aspects of this paper that align to this corporate priority.

### **3.2 Helping people live healthy and independent lives**

Co-designing an approach that supports older people to access day opportunities that better meets their outcomes will ensure that more of our clients are able to live healthy and independent lives.

Furthermore, our approach going forward will look to ensure that carers are supported to live healthy and independent lives alongside those they care for.

### **3.3 Supporting and protecting vulnerable people**

Through carrying out this work, we seek to better support vulnerable adults who have been assessed by our social care teams in the community who currently do not fully utilise the current offer.

Furthermore, we will work collaboratively with colleagues and providers to ensure that any service offer fully protects and safeguards those that use them.

## **4. SIGNIFICANT IMPLICATIONS**

### **4.1 Resource Implications**

This paper does not have any significant resource implications. Any significant resource implications that result from future work will seek approval from Adults Committee at a later date.

### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

*There are no significant implications in this category.*

### **4.3 Statutory, Legal and Risk Implications**

*There are no significant implications in this category.*

#### 4.4 Equality and Diversity Implications

*There are no significant implications in this category.*

#### 4.5 Engagement and Communications Implications

*Engagement and Communications Implications are set out in section 2.5 of this paper.*

#### 4.6 Localism and Local Member Involvement

*Local Members are highly likely to take an interest in this work and as such will be fully engaged in redesign activity.*

#### 4.7 Public Health Implications

*Population based measures which reduce social isolation and encourage physical activity both have a positive public health impact for older people, and this could be incorporated in the Think Communities approach.*

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Name of Officer: Stephen Howarth
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?	Yes Name of Officer: Paul White
Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	Yes Name of Officer: Fiona McMillan
Have the equality and diversity implications been cleared by your Service Contact?	Name of Officer: Wendi Ogle-Welbourn
Have any engagement and communication implications been cleared by Communications?	Yes Name of Officer: Matthew Hall
Have any localism and Local Member involvement issues been cleared by your Service Contact?	Yes Name of Officer: Wendi Ogle-Welbourn
Have any Public Health implications been cleared by Public Health	Yes Name of Officer: Tess Campbell

Source Documents	Location
N/A	N/A

## APPENDICES

### Appendix 1 – Day Service Overview

Day Service	Sessions delivered per Week	Personal Care + High Needs Supported?	Session Total Capacity	Avg. Service-users per Session (Total)	Avg. Social Care Clients per Session	Avg. Private Clients per Session	No. of Volunteers vs. paid staff
<b>East Cambs</b>							
Burwell Day Centre	5	No	40	23	2	21	2 Volunteers on the day  7 paid staff (varying hours)
Queens Court (MHA)	4	Yes	30-40	14	4	4	5 Volunteers  4 paid staff (varying hours)
<b>Fenland</b>							
Lyons Court (Age UK)	1	No	19	13	0	13	2 Volunteers  2 paid staff (varying hours)
Boyden Court (Age UK)	1	No	15	6	0	6	Various Volunteers  2 paid staff

Rosebank (MHA)	4	Yes	20	5	2	3	Information not available on the day
Oasis (Age UK)	3	No	12	9	2	7	2 Volunteers 1 paid staff
Tuesday Club (Age UK)	1	No	21	21	0	21	6 Volunteers 2 paid staff
St Augustine's Day Centre	3	No	14	6	5	1	6 Volunteers 3 paid staff
Trinity Hall Day Club (Carers Trust)	2	No	40	30	Unknown at time of review	Unknown at time of review	0 Volunteers 4 paid staff
Aliwal Manor (Excel Care)	1	No	15	3 (not including residents of care home)	3	0	1 Volunteers 1 paid staff
<b>City and South</b>							
Moorland Court (CHS)	4	No	20	9	8	1	3 Volunteers 2 paid staff
Over Day Centre	6	Yes	32	20	0	20	10 Volunteers

							9 paid staff
St Martins Day Centre	5	No	14	12	6	6	15 Volunteers  8 paid staff
Cherrytrees (Age UK)	3	No	15	11	2	9	Information not available on the day
Milton Day Centre	1	No	20	16	0	16	Information not available on the day
Orchard House (Sanctuary Care)	4	Yes	20	10	6	4	0 Volunteers  3 paid staff
<b>Huntingdonshire</b>							
Olivemedes (Oak House Care)	4	Yes	14	7	6	1	various Volunteers  2 paid staff
Ambury Road (Age UK)	2	No	17	10	1	9	Information not available on the day
Alconbury Thursday (Caresco)	1	No	24	21	0	21	22 Volunteers  2 paid staff

Friendship Club (Caresco)	2	No	24	15	0	15	0 Volunteers  2 paid staff
Vintage Club (Caresco)	1	No	24	16	0	16	8 Volunteers  3 paid staff
Ramsey Day Centre	2	No	20	15	0	15	9 Volunteers  1 paid staff
St Ives Day Centre	5	No	25	23	11	12	numerous Volunteers  7 paid staff
St Neots & District Day Centre	3	Yes	20	18	12	6	5 Volunteers  5 paid staff
Warboys & District Day Centre	2	Some personal care offered	12	9	0	9	6 Volunteers  1 paid staff
West Hunts Friendship Club	1	Some personal care offered	18	15	0	15	4 Volunteers  2 paid staff



**DELAYED TRANSFERS OF CARE (DTOC) PROGRESS REPORT**

*To:* **Adults Committee**

*Meeting Date:* **10 January 2019**

*From:* **Will Patten, Service Director of Commissioning and  
Charlotte Black, Service Director: Adults and  
Safeguarding**

*Electoral division(s):* **All**

*Forward Plan ref:* **N/A**                      *Key decision:* **No**

*Purpose:* **The report provides an update on progress related to  
Delayed Transfers of Care (DTOC).**

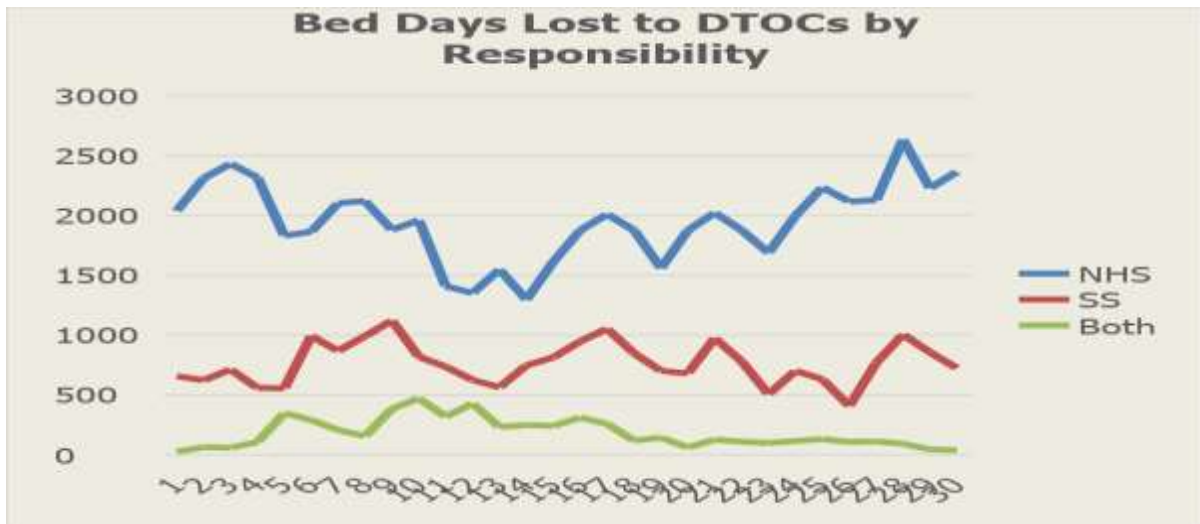
*Recommendation:* **To note and comment on the report.**

<b><i>Officer contact:</i></b>		<b><i>Member contacts:</i></b>	
Name:	<b>Will Patten</b>	Names:	Cllr A Bailey, Cllr M Howell
Post:	Director of Commissioning	Post:	Chair/Vice-Chair
Email:	<a href="mailto:Will.patten@cambridgeshire.gov.uk">Will.patten@cambridgeshire.gov.uk</a>	Email:	
Tel:	07919 365883	Tel:	01223 706398

1.1 This paper provides an update on local DTOC performance and the approach to address this pressure.

## 2.1 DTOC Performance

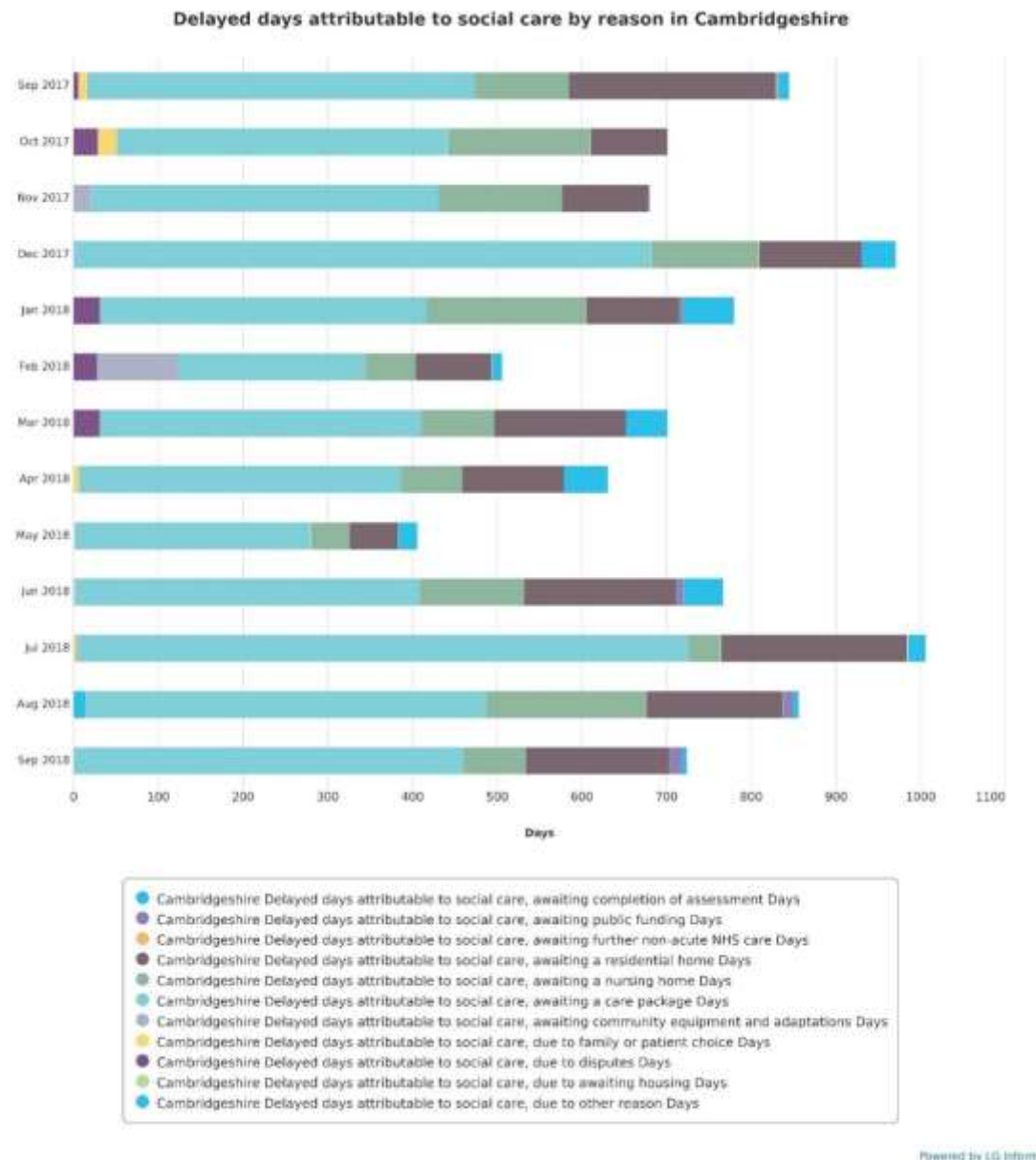
2.1.1 The latest published UNIFY data, shows that in September, there was a total of 3,127 delayed days, of which 2,734 were in acute care. 75.6% of all delayed days were attributable to the NHS, 23.2% were attributable to Social Care and the remaining 1.2% were attributable to both NHS and Social Care. The below graph shows a breakdown of DTOC performance by attributable organisation. During 2018/19, social care attributable delays have been the cause of an average of 732 lost bed days per month.



2.1.2 For September 2018 Cambridgeshire, compared to all single tier and county councils in England, is ranked 147 on the overall rate of delayed days per 100,000 population aged 18+, with a rank of 151 given to the area with the highest rate. It is ranked 146 on the rate of delayed days attributable to the NHS, and 122 on the rate of delayed days attributable to social care.

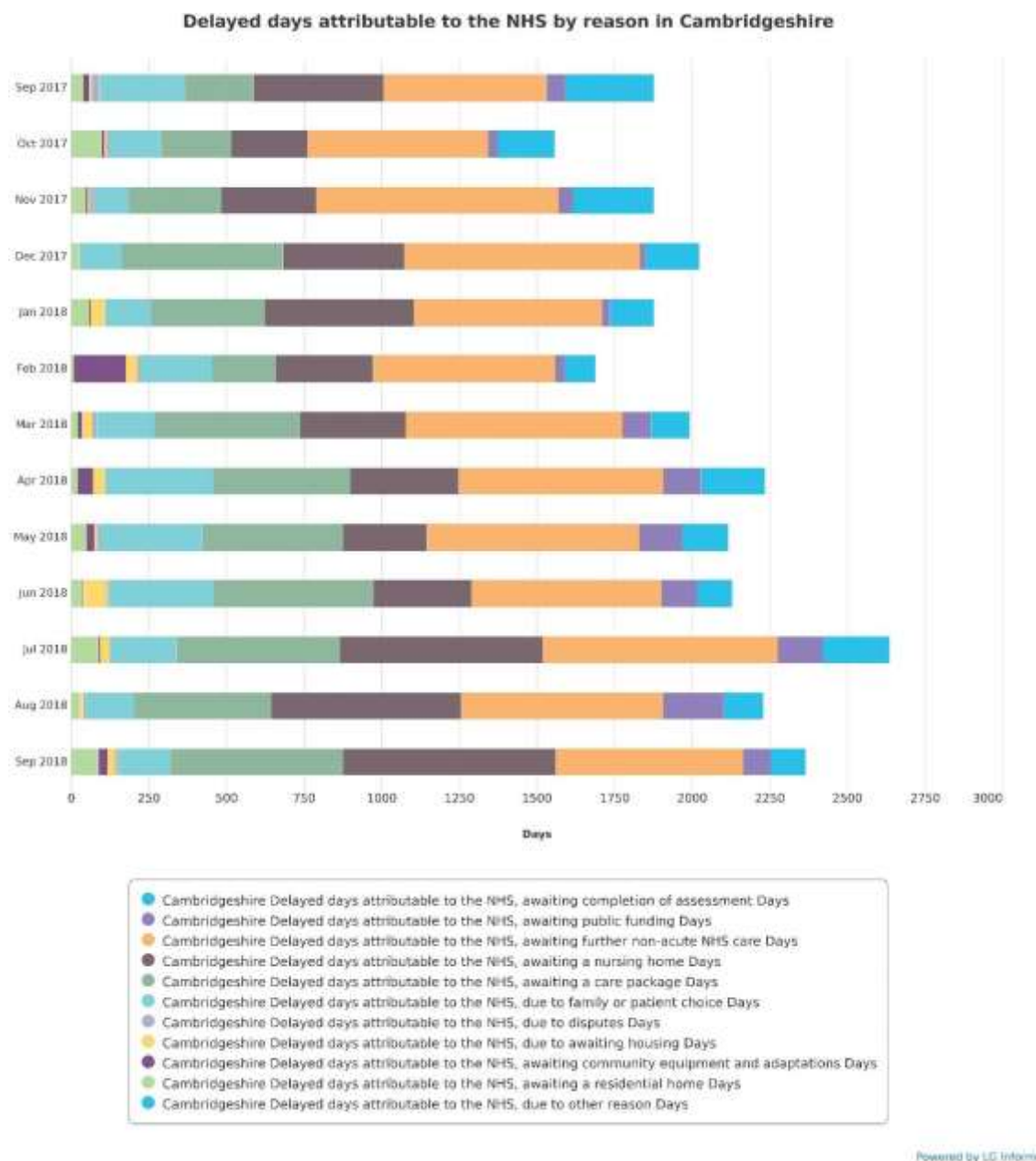
2.1.3 The below graph shows a breakdown of DTOC reasons associated with social care attributable delays. The primary reasons for social care delays in September were:

1. Awaiting care package in own home: 64%
2. Awaiting a residential placement: 23%
3. Awaiting a nursing placement: 10%



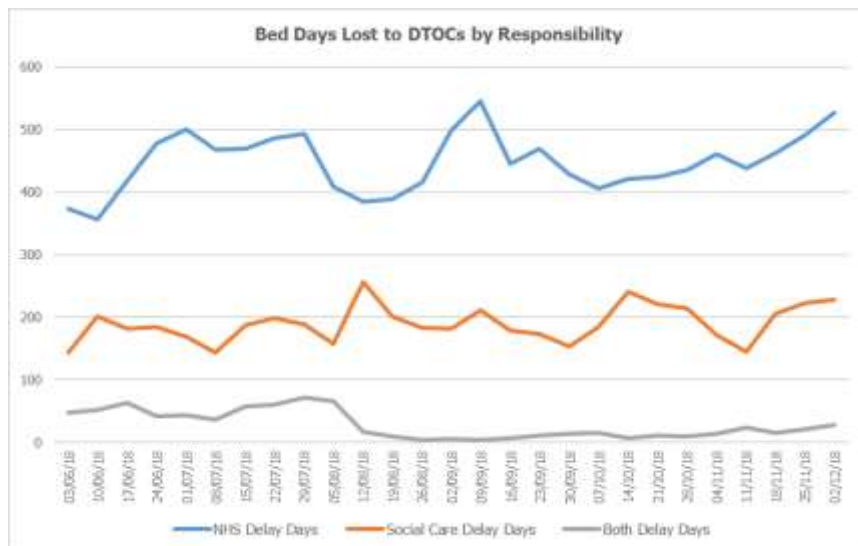
2.1.4 The below graph shows a breakdown of DTOC reasons associated with NHS attributable delays. The primary reasons for NHS delays in September were:

1. Awaiting a nursing placement: 29%
2. Awaiting further non-acute NHS care: 26%
3. Awaiting care package in own home: 24%



### 2.1.5 Local Performance since October 2018

Based on local recorded weekly validated DTOC data, the below provides a more recent overview of performance since October 2018. The below graph shows more recent performance across Cambridgeshire.



2.1.6 This highlights that we since October we have started to see an increase in both social care delays and NHS delays. The last 8 week average for social care delays is 206 lost bed days per week, compared to an average of 183 lost bed days per week in the preceding 8 week period.

### 2.1.7 Intermediate Care Delays

As of 29<sup>th</sup> November 2018, the current social care delays on the intermediate care pathway are:

- Intermediate Care at Home - awaiting domiciliary care: 3, assessment delays: 0
- Inpatient rehabilitation beds: 6

## 2.2 Actions and Mitigations to date

### 2.2.1 Significant Improved Better Care Fund (iBCF) investment in the following areas:

- **Reablement Capacity:** Investment from the iBCF was made to increase reablement capacity by 20% and recruitment has established the teams at nearly full capacity.
- **Reablement Flats:** Additional capacity was commissioned across Ditchburn and Doddington Court to provide support to patients requiring a further period of recovery before returning home following hospital discharge.
- **Community Equipment:** additional investment to support the provision of equipment to enable people to manage as independently as possible in the home of their choice.
- **Dedicated Social Worker at Addenbrookes Hospital to support self-funders:** recruitment of a dedicated worker to support individuals who self-fund their care through the hospital discharge process.
- **Strategic Discharge Lead:** a coordinating social worker discharge lead has been established in Addenbrookes, Hinchingsbrooke and Peterborough City Hospital.

This has supported greater oversight of the system and coordination of discharges via the Integrated Discharge Service hubs, including working with partner organisations to ensure the correct agencies are involved in discharge planning.

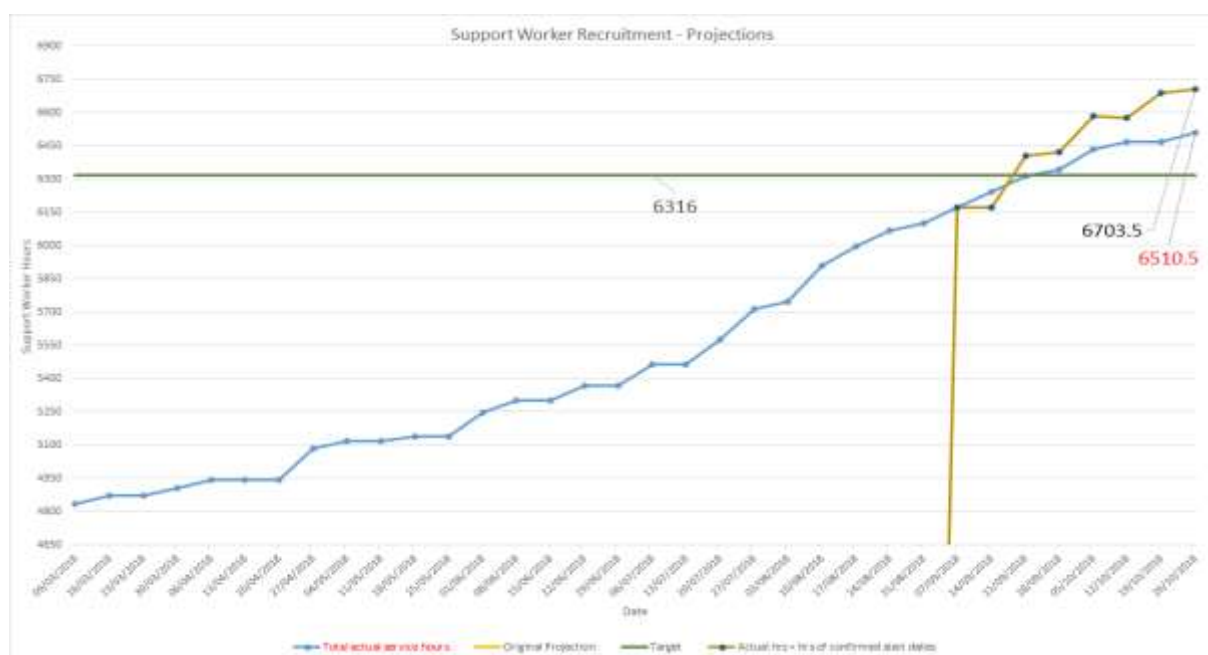
- **Trusted Assessor:** the service was commissioned from Lincolnshire Care Association (LINCA) and provides trusted assessments on behalf of care homes, to reduce unnecessary discharge delays in Addenbrookes.
- **Increased Social Worker Capacity in Discharge Planning Teams:** four additional social worker posts have been recruited to (2 in Addenbrookes, 1 in Hinchingsbrooke and 1 in Peterborough City Hospital), providing additional assessment capacity, including capacity to support the 4Q process.

**2.2.2 Care Home Education:** The Better Care Fund jointly funds, with the CCG, the Care Home Support Team who are working with the Local Authority Quality Improvement Team, the Kings Fund and clinical staff from CUH to target the top 20 care homes to reduce emergency admissions and reduce length of stay in hospital.

### 2.2.3 Streamlining of discharge processes:

- There has been a rationalisation of discharge referral processes to include social care and reablement referrals, to enable faster referral and prevent unnecessary delays as a result of process.
- Discharge processes for community beds and intermediate care have also been reviewed and since June 2018 all social care referrals are being managed at a single coordination point via the reablement team. This is supporting the flow of patients off of this pathway.

**2.2.4 Expansion of reablement:** there has been significant ongoing investment in the expansion of the reablement service. An aggressive recruitment campaign and on boarding process has resulted in the service being staffed to deliver in excess of 6,500 hours of care per week, a significant increase on the 4,800 hours of care the service was offering previously. The graph below shows the recruitment trajectory and associated increase in hours.



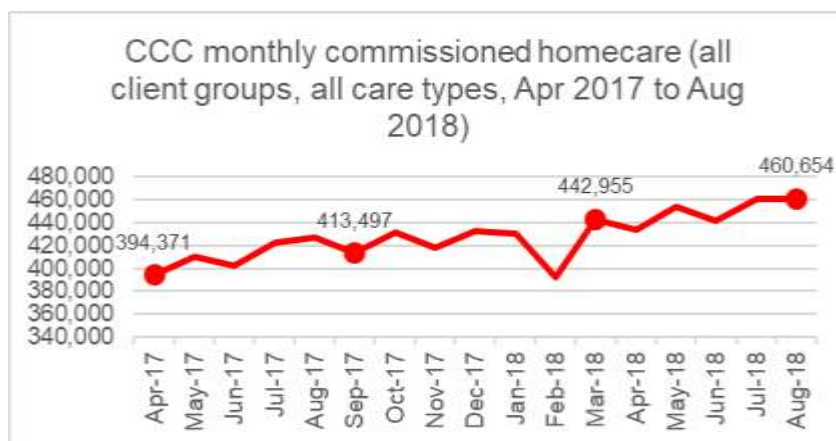
#### 2.2.5 **Brokerage enhancements, including:**

- **Onsite brokerage presence:** a designated broker is on site at all acute hospitals on a permanent basis, working jointly with discharge planning teams.
- **Additional resource within brokerage team:** the council has committed significant investment to support the expansion of the brokerage team. This will provide additional capacity within the team and ensure we have a robust management structure to support the recent restructure to establish a joint Cambridgeshire and Peterborough team. A Head of Brokerage and Quality Improvement has been in post since October and additional posts are currently being recruited to.
- **Brokerage service to support self-funders:** Supporting people who self-fund their own care and support requirements is key to managing pressures both within winter and throughout the year. The Councils along with our local health partners have therefore engaged an organisation called 'My Care Selection' to deliver a brokerage service to support self-funders. The business model adopted means this can be implemented at no cost to the system and is governed by a robust Memorandum of Understanding. It has been implemented within Worcestershire with successful outcomes achieved.
- **Bed State Capacity Tracker:** Capacity Tracker has been implemented across the Cambridgeshire and Peterborough system and went live on the 26<sup>th</sup> November 2018. It is a website that aims to improve patient flow and minimise DTOCs, providing a real time overview of bed capacity and making it easier to locate available care home placements. Demonstration days and communications have been undertaken with care homes and there will be an ongoing focus on maximising utilisation of the tool across care homes moving forward.

2.2.6 **Additional Care Home Capacity:** Since November 2017, the Council have sought to address the shortfall identified through a Care Home Development project which is taking a short, medium and long term approach: The Council have successfully extended the current block contract for long term provision by 39 beds which has addressed the shortfall of Dementia Care Home Beds within the Cambridge City area.

2.2.7 **Domiciliary Care Capacity:** In November 2017, the Home and Community Support Contract replaced the existing Framework Contracts for homecare services across adults, older people, children's social care and NHS Continuing Healthcare with a Dynamic Purchasing System (DPS). The DPS acts as an approved list of providers which opens every three months to enable new providers to join. This allows the model to flex and adapt to changes in the market. The new commissioning approach was highly successful in increasing the number of organisations commissioned by the Council to deliver homecare. In fact, the number of providers have increased from 24 to 77 across all client groups. The number of homecare hours delivered has also increased by 12.5% since April 2017.





## 2.3 Additional Actions to Address Pressures

2.3.1 In addition to the actions already taken by the Councils, the following outlines the additional measures we are putting in place to support the ongoing pressures, particularly over the winter months.

2.3.2 **Additional Discharge Planning Team capacity:** we are currently recruiting to 8 additional locum social workers and 2 additional occupational therapists for discharge planning on an interim basis until April 2019. This will ensure that referrals can be assessed and supported quickly over the winter months and we can reduce the unnecessary over-prescription of care.

### 2.3.3 Operational responses:

- **CHC Hospital Discharge Pathway:** we are working with the CCG and wider system to implement the new 'Care Test' process for CHC, which will replace the current 4Q process.
- **Operational prioritisation:**
  - Prioritisation of referrals from hospitals for available domiciliary, residential and nursing care capacity
  - Prioritisation of referrals from hospital for reablement
  - Prioritisation of referrals from inpatient rehabilitation beds and health interim beds to free up capacity
  - Prioritisation of referrals from Intermediate Care at Home to free up capacity
  - Review all existing reablement work load to see if we can free up capacity, or close down any open cases
  - Divert staff from the long term teams / review teams to support Discharge Planning Teams to ensure we have no assessment delays
  - Joint communications with system partners about staying well and away from hospital
  - Contact all providers asking them to utilise the trusted assessor and/or make timely assessments and transfers

2.3.4 **Integrated Brokerage:** The council is working in partnership with the CCG to develop a fully integrated brokerage service which will provide a single route to market and prevent competition between commissioners and artificial price rises. This will also support us to maximise usage of existing capacity across the market. We have



identified 8 desks for Continuing Health Care (CHC) to co locate at Stanton House with the local authority brokerage team. These desks will be utilised by a mixture of brokers and case management clinical staff, which will expedite the process of decision making and flow for patients.

- 2.3.5 **Capacity and Demand:** The capacity & demand work stream is currently undertaken a piece of work that will give a system view of current demand based on 12-months historic activity and a forecast to October 2020, which includes growth of 4.4%. We are also collating all current and planned commissioned services and commissioning intentions that will impact in any way on the net provision for complex cases. This work will by default identify the gap in provision currently and to October 2020. We will prepare costed proposals to meet the gap. The target delivery of this output is to identify the gap within the next 3-weeks and rapidly follow on with proposals.
- 2.3.6 **Increased Domiciliary Care Capacity:** investment of £2.4m of Hancock monies is being utilised to purchase additional domiciliary care capacity. The Council has purchased an additional 2956 hours per week of care from MiDAS and Beaumont following the recent decommissioning of the Intermediate Care provision. However, we in order to support flow through the ICT pathway, we have agreed to the CCG utilising some of this capacity direct from the provider, which is impacting on the amount available for domiciliary care in the immediate term. In addition, the Hancock monies are also being invested to support the further expansion of reablement as a provider of last resort.
- 2.3.7 **Increased Care Home Capacity:** Since November 2017, the Council have sought to address the shortfall identified through a Care Home Development project which also has a medium and long term approach:
- 2.3.8 **Medium Term:** The Council are currently working to tender an additional block contract for long term beds within East Cambridgeshire, Huntingdonshire and South Cambridgeshire. This will aim to target the ongoing shortfall of 111 beds by May 2019.

In addition to this, the Council will be reviewing current commissioning arrangements for temporary respite and interim provision over the next 12 months with the aim of procuring provision which is more outcomes based and achieves best value for money.

- 2.3.9 **Long Term:** The Council are currently engaged in an innovative, competitive dialogue process aimed at procuring a strategic partner to design, build and run a number of Care Homes on Council owned land under a lease arrangement. This programme will target both the current and future shortfall of beds as well as introducing a number of high quality beds to the self-funder market through an ongoing build programme. The contract is currently due to be awarded to a strategic partner in July 2019, with an initial build site being identified within East Cambridgeshire as part of the procurement process. As part of this work, the Council are also engaged with health partners around integrated models of care delivery which will be explored over the course of the strategic partnership.

## 2.4 Risks and Issues

2.4.1 The following provides an overview of potential risks and issues which may impact on local performance and delivery:

- **Funded Nursing Care:** From the 1<sup>st</sup> January, the CCG will start to pay FNC direct to care homes. This will result in care homes receiving separate payments from the CCG and Local Authority (currently the Local Authority block pays and then claims the FNC element of the care package back from the CCG). This will impact on systems and payments, which will have to be adapted to accommodate the new arrangements. There is also a risk of relations with care homes being impacted if there are not clear communications around payment and agreed protocols for the management of FNC eligibility reviews.
- **Domiciliary Care Provision:** some of the additional MiDAS and Beaumont domiciliary care capacity that the local authority has commissioned is being utilised by the CCG on a temporary basis to maintain flow through the ICT pathway. This will continue to impact on the amount of additional capacity that is available to the local authority for the provision of domiciliary care.
- **Recruitment to additional social worker capacity:** there are tight recruitment timelines to get agency staff in post, which will impact on capacity if the additional agreed posts are not fully recruited to.
- **Implementation of CHC Care Test:** The new Care Test pathway is being implemented to replace the current 4Q pathway. Discharge planning nurse capacity has been an ongoing issue with the 4Q pathway and if there is insufficient capacity across CPFT/acute nursing to implement the new pathway, this will impact on its delivery and effectiveness.

## 3. ALIGNMENT WITH CORPORATE PRIORITIES

### 3.1 Developing the local economy for the benefit of all

The following bullet points set out details of implications identified by officers:

- Improved provision of health and social care services that are more joined up, personalised and deliver care in the right setting at the right time.

### 3.2 Helping people live healthy and independent lives

The following bullet points set out details of implications identified by officers:

- Increased focus on prevention and early intervention to support people to remain as independent as possible for as long as possible.

### 3.3 Supporting and protecting vulnerable people

The following bullet points set out details of implications identified by officers:

- Better coordination of health and care support to prevent unnecessary delays in getting people home from hospital and enable services to be easier to navigate.

#### **4. SIGNIFICANT IMPLICATIONS**

##### **4.1 Resource Implications**

*There are no significant implications within this category.*

##### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

*There are no significant implications within this category.*

##### **4.3 Statutory, Legal and Risk Implications**

*There are no significant implications within this category.*

##### **4.4 Equality and Diversity Implications**

*There are no significant implications within this category.*

##### **4.5 Engagement and Communications Implications**

*There are no significant implications within this category.*

##### **4.6 Localism and Local Member Involvement**

*There are no significant implications within this category.*

##### **4.7 Public Health Implications**

*There are no significant implications within this category.*

<b>Source Documents</b>	<b>Location</b>
<b>NHS England nationally published Delayed Transfer of Care (DTOC) data</b>	<a href="https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/">https://www.england.nhs.uk/statistics/statistical-work-areas/delayed-transfers-of-care/</a>

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	n/a
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	n/a
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	n/a
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	n/a
<b>Have any engagement and communication implications been cleared by Communications?</b>	n/a
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	n/a
<b>Have any Public Health implications been cleared by Public Health</b>	n/a

**ADULTS POSITIVE CHALLENGE PROGRAMME**

*To:* **Adults Committee**

*Meeting Date:* **10<sup>th</sup> January 2019**

*From:* **Charlotte Black, Service Director: Adults and Safeguarding, People and Communities**

*Electoral division(s):* **All**

*Forward Plan ref:* **N/A** *Key decision:* **No**

*Purpose:* **To update the Adults Committee on the progress of the Adults Positive Challenge Programme**

*Recommendation:* **Adults Committee is asked to note and comment upon the information contained in this report**

<b><i>Officer contact:</i></b>		<b><i>Member contacts:</i></b>	
Name:	<b>Charlotte Black</b>	Names:	Cllr A Bailey, Cllr M Howell
Post:	Service Director	Post:	Chair/Vice-Chair
Email:	Charlotte.Black@cambridgeshire.gov.uk	Email:	
Tel:	01223 727990	Tel:	01223 706398

## **1. BACKGROUND**

- 1.1 Further to the previous update to Adults Committee in September 2018, this report is to provide an update on the progress and impact of the Fast Forward Programme, and an update on the Adults Positive Challenge Programme (APCP) more generally, including the emerging picture of impact and mechanisms for understanding this going forward.

## **2. MAIN ISSUES**

### **2.1 Fast Forward Update**

- 2.1.1 The fast forward programme of work was designed to accelerate several of the demand management opportunities identified through the Outline Business Case (OBC) produced by the consortia of CapGemini and iMPOWER which was presented to Adults Committee in March 2018.
- 2.1.2 Further to the update provided in September, the web page work has now concluded and the other areas of work continue and will flow into the longer term programme delivery plans (see below) at a broader scale. An update on the impact of this work, and plans for the next stage of this work, are provided below.
- 2.1.3 In total seven web pages were developed and launched as part of the Fast Forward work:
- an adults landing page <https://www.cambridgeshire.gov.uk/residents/adults/>
  - community support <https://www.cambridgeshire.gov.uk/residents/adults/care-and-support/planning-your-care/community-support/>
  - help in a crisis, <https://www.cambridgeshire.gov.uk/residents/adults/help-in-a-crisis/>
  - worried about someone, <https://www.cambridgeshire.gov.uk/residents/adults/care-and-support/worried-about-a-friend-or-family-member/>
  - assessments - <https://www.cambridgeshire.gov.uk/residents/adults/care-and-support/planning-your-care/your-assessment/>
  - help with meals - <https://www.cambridgeshire.gov.uk/residents/adults/staying-independent/help-with-meals-for-adults-and-older-people/>
  - end of life - <https://www.cambridgeshire.gov.uk/residents/adults/planning-ahead/your-healthy-future/end-of-life-care/>
- 2.1.4 The pages went live through July and August, with the evaluation period covering July, August, September and October. It is challenging to evaluate the impact of the web pages in isolation of other initiatives. However, desirable demand trends have been identified through the web analytics, and subsequent calls to the contact centre, referrals to early help and requests for assessment.
- 2.1.5 Specific findings include;
- 18% increase in the length of time visitors spend on the ASC landing page
  - Significant drop in requests for assessment both year on year and in the months since the new pages launched
  - High bounce and exit rates for information and advice pages, suggesting that visitors are then exiting to signposted sites

- 2.1.6 It should be noted that whilst there have been some anomalies in flow data in September 2018 due to the launch of MOSAIC, it is unlikely that this would have had a significant impact on the public web data, and contact centre calls recorded.
- 2.1.7 A number of Technology Enabled Care [TEC] focus groups have been held with representatives from a range of front line adult teams who have provided a range of different viewpoints as to what their vision of TEC is and barriers to getting there. We have engaged with the Communication Team who are working through some practical ways to provide engaging case studies to increase awareness and confidence in TEC. Following feedback from the focus groups, the TEC team have been able to make some changes to the TEC First training that is offered to staff, and are creating some focused bite sized training that will be trialled in the next sessions. In the new year, the focus groups will be evaluated, with a view to building on the shared learning and practices that have already developed.
- 2.2 **Adults Positive Challenge Programme (APCP)**
- 2.2.1 Alongside the delivery of the Fast Forward Programme, a significant amount of work has been progressed to define the programme of change that will deliver benefits in 2019/20 and 2020/21 across Cambridgeshire and Peterborough. The programme will see both Councils transition to a strengths and assets led system of delivery; positively managing demand by addressing people's needs earlier to prevent them from escalating, empowering people to do more for themselves and building resilient and self-sufficient communities which will mean that people have greater independence and better outcomes, with different or less intervention from the state.
- 2.2.2 At this stage plans are focused on 8 areas:
- a. Changing the Conversation – a focus on maximising independence at every interaction and embedding a strengths based approach in practice.
  - b. Re-ablement – short term interventions to prevent or lessen ongoing need
  - c. Technology Enabled Care [TEC] maximising use of technology and equipment
  - d. Carers – proving timely and proportionate support
  - e. Commissioning
  - f. Mental Health Enablement
  - g. Learning Disability Enablement
  - h. Neighbourhoods
- 2.2.3 Work with frontline staff is starting to deliver cost and demand impacts. This follows the changing the conversation sessions, and further embedding work, that has been delivered with frontline staff in multiple teams. To date this work has been delivered with the long term care teams in Huntingdonshire, Fenland, the physical disabilities team, and the new promoting wellbeing (overdue reviews) team.

- 2.2.4 The promoting wellbeing (reviews) team as at 19th November have completed 218 reviews on packages totalling £4.526m per annum. Previous review exercises have typically resulted in 3% increase in package value (c£135k for the packages reviewed). Of the cases reviewed to date there is projected to be a net annual increase of £7.2k per annum – conservatively this represents a cost avoidance benefit of £127.8k. However following review a package size has increased we might also expect that further costs from an urgent unplanned intervention may have been avoided also.
- 2.2.5 As set out in a previous update to committee the changing the conversation workstream focuses on working closely with frontline staff. In the first instance this is through practice development sessions with staff working through real scenarios to identify opportunities to prevent, reduce and delay demand, whilst maximising independence. These sessions are then followed by weekly huddles, which are peer to peer reflection sessions focusing on a small number of cases each week.
- 2.2.6 The financial impact of the changing the conversation work is being tracked through the trajectory management analysis described below. Alongside the quantitative impact, there has been strong qualitative feedback from staff, who have responded positively to the practice focus supported through this work. The examples below is illustrative of the outcomes and impact being achieved by frontline staff using this approach;
- 2.2.7 *'Notification received of potential financial abuse and a substance misuse situation in the household of an older person. Allegations were against a family member who is also an informal carer. Social care worker brought the case to the huddle to discuss her proposed approach and the risks she had considered as part of this. Following the discussions and input from colleagues, she took a different approach and was able to get assurances the person was safe and well, without any negative consequences to the family relationship or informal caring role. The service user was satisfied that she had been heard and listened to, the family relationship was not impacted, and the informal caring role was maintained'.*

## 2.2.8 Huddle impact – a case study

- Wife providing care for end of life husband. Their wish is that he remain at home.
- 'Mrs X' declining any support for herself but clearly becoming exhausted.
- Social Worker wanted to support wife to avoid carer breakdown.
- Discussed at huddle and the team had a number of suggestions (which drew on the behavioural science framework, particularly around incentives) to encourage 'Mrs X' to look after herself so she could continue her caring role.
- Update today:
  - Has a carer's assessment and plan
  - Continues to support as much of her husband's care as she can
  - He continues to be cared for at home
- NB - Continuing Health Care assessment has been completed.



- 2.2.9 Work with frontline staff has also included a significant focus on embedding technology enabled care (TEC) first thinking into all client and public conversations. In first half of the 2018/19 financial year referrals to the TEC team have increased by 17.5% compared to 2017/18. Analysis of referral sources highlights that key teams have had a step change in their referrals to the TEC team including a year on year increase of 162% from the reablement team and a 58% increase from older people locality teams.
- 2.2.10 There are a number of key enablers of success for the APCP that sit outside of Adult Social Care, and a Council-wide approach to the programme has been established to ensure that the interdependent areas of the business work together to deliver the programme ambition. Work to align some of the existing digital plans and activities with APCP, and explore new areas for development to empower people to be in control of their care and wellbeing is underway, and Business Intelligence are developing the Trajectory Management with external experts in this field to enable an in depth understanding of cost and demand flows across the system. Collaborating with other parts of the organisation, and system to deliver the ambition of APCP will continue to be a key area of focus moving forward.
- 2.2.11 In September 2018, General Purposes Committee (GPC) approved a Transformation Fund Investment of up to £3m for the period to April 2021 to support the delivery of the approach in Cambridgeshire. Investment will be accessed in tranches, supported by clear business cases, to support the programme as it progresses.

## 2.3 Programme Impact

2.3.1 The impact of the APC Programme will be monitored via a 'trajectory management' approach as a key part of the governance arrangements; this will provide a clear understanding of the cost and demand shifts happening as a result of the programme and will form the basis of discussion for action and inform both the immediate programme focus and longer term delivery to ensure a focus is on the right areas. This is an iterative process that will continue to be developed as the programme evolves and matures.

2.3.2 At the time of Committee, two Trajectory Boards will have taken place in October and December 2018. The Trajectory Boards are the principal governance mechanism for the programme and will provide oversight, challenge and guidance to ensure that the programme is meeting the required cost and demand position. At the time of writing only one Trajectory Board has been held, and the information below is from the October board submission. A supplementary appendix will be produced ahead of Committee to include a summary of the trajectory analysis to include data through to end-November, and we will adjust activity information regularly taken to Committee to summarise the latest trajectory positions.

2.3.3 An executive dashboard is presented to the board which summarises the overall cost and demand baseline for the programme and highlights changes since the previous board, and is backed-up by a detailed financial analysis and set of performance metrics for each workstream. The initial version (see below) was presented to the board in October to illustrate the expected analysis that will be provided to each board.

## 2.3.4 Cambridgeshire Trajectory Position – May-September 2018

### Report

- This is the first presentation of illustrative trajectories for the APC programme. Based on the available data this current data only reflects the Cambridgeshire position. The report has been produced using financial outturn data from May-September 2018

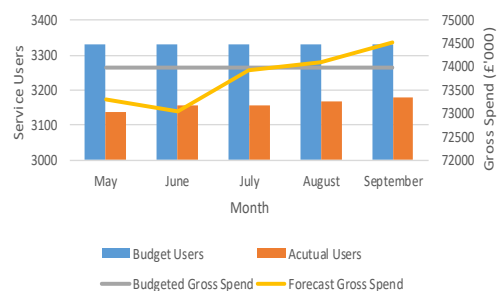
### Headline Numbers – OP / PD

- September forecasts suggest a **favourable OP / PD position against budget of £836k** – predominantly realised through increased income offsetting service growth. **Gross spend is projecting a £600k increase**
- Excluding live in care, **there are a 151 fewer service users compared to budget**. However the service user population has **increased month on month since May, growing by 44 to September**
- All bed based unit costs currently exceed budget forecasts**, but the average unit cost for **home care is 14p per hour under the forecast value**
- All service unit costs, excluding nursing care increased from August to September.

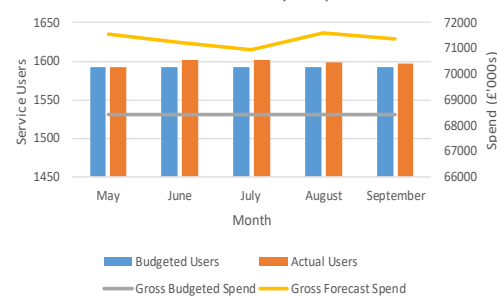
### Headline Numbers – LD

- September forecasts suggest an **overspend of £2.6m**. Spend pressures in **community services of £2.8m** are having a substantial impact. The increase driven by both rising client volumes and unit costs
- There are **5 more service users than budgeted for**, although volumes have fallen since June
- All unit costs have increased** from May - September

OA / PD Cost and Demand - May-September 2018



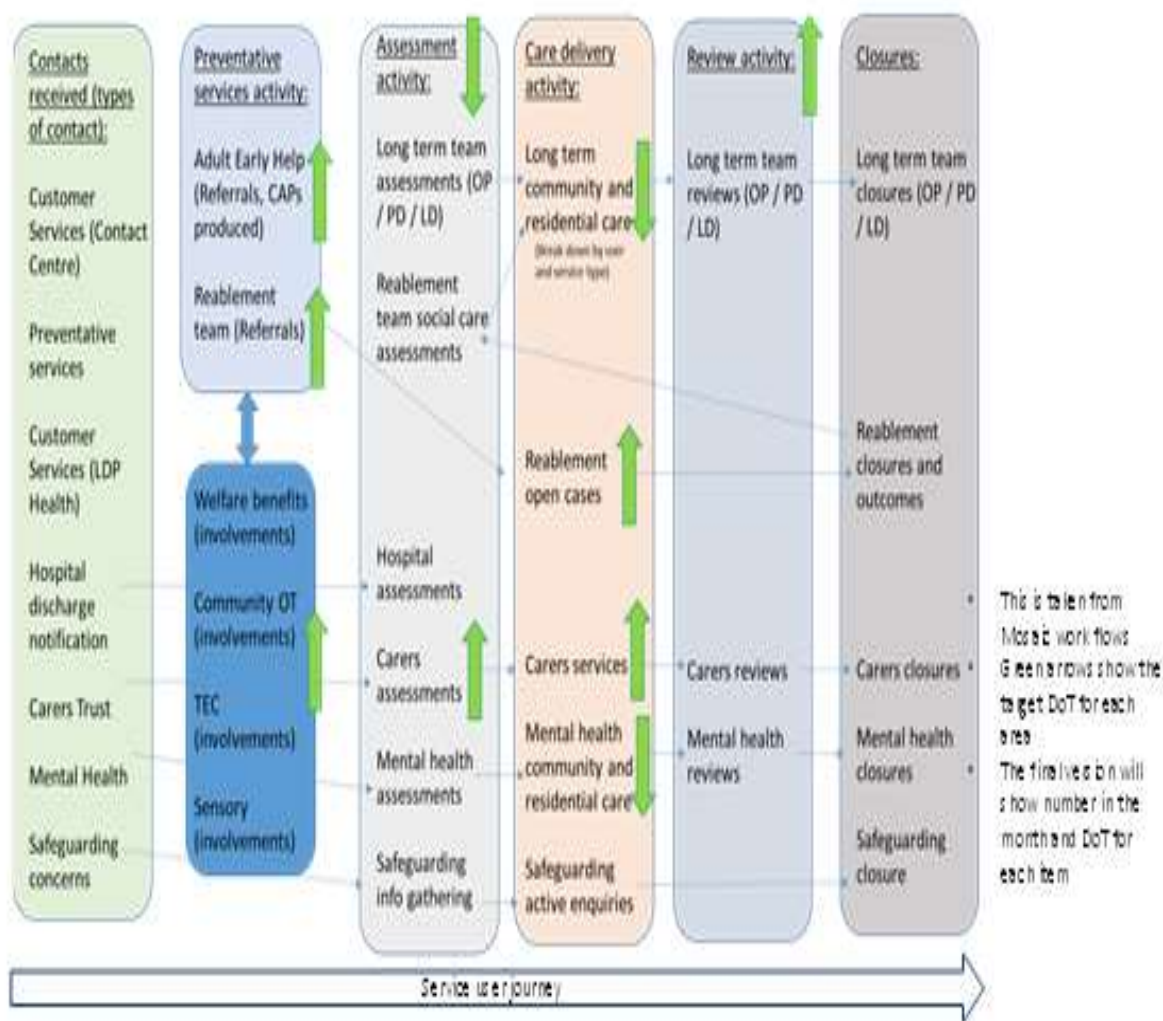
LD Cost and Demand - May - September 2018



2.3.5 The overarching cost and demand position will be informed by a series of flow measures throughout the customer journey, which will enable the programme to understand activity at interaction points throughout the customer journey, and the outcome of these engagements. This will help the programme to identify the impact of interventions at steps in the customer journey, and target shifts in emphasis or additional work as necessary. The initial set of flow measures are set out below:

2.3.6

## Service user flow



2.3.7 Each workstream will be managed against a series of 'primed metrics'. These metrics will be reported in line with the Trajectory Board cycle and will inform the analysis and updates presented to board. The metrics will fit into three categories – output, outcome and impact. As part of the workstream design process each workstream has identified an initial set of primed metrics (please see below for the suggested output and outcome measures presented to programme board) which will be refined over the coming period.

### 2.3.8 Project Output Measures

Changing the conversation	<ul style="list-style-type: none"> <li>• A reduction in the number of unplanned reviews</li> <li>• % of reviews completed increased</li> <li>• Increase in reviews that change and contribute to the care and support plan but do not result in an increase in contribution</li> <li>• Reduction in level of crisis calls to duty teams</li> <li>• Increase in the number of people receiving information, advice and guidance</li> <li>• Increase the number of people signposted to universal services</li> <li>• Increase in number of visits to ASC pages on the website</li> <li>• Response time from Adult Early Help reduces</li> </ul>
Reablement	<ul style="list-style-type: none"> <li>• Number of clients referred to and entering Reablement increased</li> <li>• % of hours delivered by service as reablement increased</li> <li>• Duration of Reablement intervention decreases</li> <li>• Increase in numbers of people from under accessed groups receiving reablement</li> </ul>
TEC	<ul style="list-style-type: none"> <li>• Increased use of TEC</li> <li>• Increased deployment of TEC enabled discharge</li> <li>• Increased number of trusted assessments</li> <li>• Increased provision of moving and handling equipment</li> <li>• Increased use of Just Checking</li> <li>• Increase in self-referrals</li> <li>• Management of waiting times</li> </ul>
Carers	<ul style="list-style-type: none"> <li>• Increased number of identified carers</li> <li>• Increased numbers of carers receiving support</li> </ul>
Learning Disability	<ul style="list-style-type: none"> <li>• No. clients in receipt of waking / sleeping night support reduces</li> </ul>
Commissioning	<ul style="list-style-type: none"> <li>• Increase in the number of PAs recruited and micro-enterprises set up</li> <li>• Residential care homes are deregistered to become care suites</li> </ul>

### 2.3.9 Project Outcome Measures

Changing the conversation	<ul style="list-style-type: none"> <li>• Increase in people progressing from the website to self-help</li> <li>• Increase in service user satisfaction (service user survey)</li> <li>• Reduced duration older people with eligible needs are receiving statutory social care support (i.e. lifetime of care)</li> <li>• Reduction in number of self-funders entering care because they have depleted their funds</li> <li>• Fall in the number of people receiving long-term care without first undergoing a period of reablement</li> </ul>
Reablement	<ul style="list-style-type: none"> <li>• Increased proportion of no-care or reduced care outcomes of reablement</li> <li>• Increased % of people aged 65 and over still at home 91 days after discharge from hospital into Reablement service</li> <li>• Positive customer feedback on impact from reablement survey</li> </ul>
TEC	<ul style="list-style-type: none"> <li>• More people are supported with TEC only as proportion of total service user base</li> <li>• Reduce / prevent the number of packages requiring double handed care / reduced DTOC requiring double-up care</li> <li>• Improved perceptions of TEC - Results of surveys</li> <li>• Survey - TEC process simple and user friendly / TEC first approach</li> </ul>
Carers	<ul style="list-style-type: none"> <li>• A reduction in the number of services that begin or increase due to carer breakdown / in response to a crisis</li> <li>• Greater proportion of carers reporting that they are able to look after themselves in carers survey</li> <li>• Greater self-reported satisfaction and quality of life from carers survey.</li> <li>• Reduction in one off direct payments due to increased consistency in practice when assessing carers</li> </ul>
Learning Disability	<ul style="list-style-type: none"> <li>• Proportion of young adults with a learning disability in paid employment as % of the cohort population</li> <li>• Reduction in annual number of new adult packages from the 14-25 cohort</li> </ul>
Commissioning	<ul style="list-style-type: none"> <li>• Reduction in people and hours on domiciliary care pending list</li> <li>• Increase in the number of Direct Payments</li> <li>• People receive outcome-based services which support them back towards independence</li> </ul>

2.3.10 The trajectory management approach will evolve over the next few months of the programme. This will be driven by the availability of performance measures, particularly for items that haven't been measured previously, together with the discussion at Trajectory Board and the information that will enable the programme to govern effectively. It is proposed that quarterly update reports be brought to Committee.

2.3.11 The next phase of investment for the programme has been agreed by the invest sub-committee and covers the continued support from Impower for 12 months, dedicated programme delivery manager and programme support; funding for business intelligence, IT systems, legal and communications support; Occupational Therapy capacity for the

TEC team to focus on removing the need for double up care packages; extension of the promoting wellbeing team until June 2018 pending the outcome of the redesign of the reviews process; and some Senior Occupational Therapy capacity. Further funding business cases will be produced in February as the needs of other work streams are finalised.

### **3. ALIGNMENT WITH CORPORATE PRIORITIES**

#### **3.1 Developing the local economy for the benefit of all**

There are no significant implications for this priority.

#### **3.2 Helping people live healthy and independent lives**

The purpose and principle of the Adults Positive Challenge Programme is fundamentally about helping people to live healthy and independent lives, by shifting social care practice away from long-term support towards more preventative support advice to enable this.

#### **3.3 Supporting and protecting vulnerable people**

Safeguarding vulnerable adults is central to the purpose of Adult Services. As the service's focus encompasses more preventative activities and less long-term care support, ensuring that risk is managed effectively and arrangements are in place to support appropriate safeguarding of vulnerable adults will continue to be essential.

### **4. SIGNIFICANT IMPLICATIONS**

#### **4.1 Resource Implications**

Resource implications will be described in individual business cases to draw down investment funding for the programme.

#### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

*See wording under 4.1 and guidance in Appendix 2.*

#### **4.3 Statutory, Legal and Risk Implications**

We do not anticipate any change to statutory or legal duties as a result of this programme nor do we anticipate any greater level of risk. The new model is expected to be both safer and higher quality, in particular because local teams.

#### **4.4 Equality and Diversity Implications**

There are no significant implications in this category.

#### **4.5 Engagement and Communications Implications**

The APC programme will entail a significant programme of engagement and communication.

#### 4.6 Localism and Local Member Involvement

The new model focuses on a placed based or neighbourhood model and localism, community engagement and Local Member involvement will be fundamental to the transformation.

#### 4.7 Public Health Implications

There are no significant implications in this category.

Source Documents	Location
Adults Committee Report September 2018 General Purposes Committee Transformation Fund Investment Bid	<a href="#">Link</a> <a href="#">GPC Paper</a>

Implications	Officer Clearance
Have the resource implications been cleared by Finance?	Yes Name of Financial Officer: Stephen Howarth
Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?	N/A
Has the impact on statutory, legal and risk implications been cleared by LGSS Law?	N/A
Have the equality and diversity implications been cleared by your Service Contact?	N/A
Have any engagement and communication implications been cleared by Communications?	N/A
Have any localism and Local Member involvement issues been cleared by your Service Contact?	N/A
Have any Public Health implications been cleared by Public Health	N/A





**FINANCE AND PERFORMANCE REPORT – NOVEMBER 2018**

*To:* **Adults Committee**

*Meeting Date:* **10<sup>th</sup> January 2019**

*From:* **Chief Finance Officer**

**Executive Director: People and Communities**

*Electoral division(s):* **All**

*Forward Plan ref:* **Not applicable**      *Key decision:* **No**

*Purpose:* **To provide the Committee with the November 2018 Finance and Performance report for People And Communities Services (P&C).**

**The report is presented to provide the Committee with the opportunity to comment on the financial and performance position as at the end of November 2018.**

*Recommendations:* **The Committee is asked to review and comment on the report.**

<b><i>Officer contact:</i></b>	
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Tel:	01223 714770

## 1.0 BACKGROUND

- 1.1 A Finance & Performance Report for People and Communities (P&C) is produced monthly and the most recent available report is presented to the Committee when it meets – the latest is provided in Appendix B.
- 1.2 The report is presented to provide the Committee with the opportunity to comment on the financial and performance position of the services for which the Committee has responsibility.
- 1.3 This report is for the whole of the P&C Service, and as such, not all of the budgets contained within it are the responsibility of this Committee. Members are requested to restrict their attention to the budget lines for which this Committee is responsible, which are detailed in Appendix A, whilst the table below provides a summary of the budget totals relating to Adults Committee:

<b>Forecast Variance Outturn (Previous) £000</b>	<b>Directorate</b>	<b>Budget 2018/19 £000</b>	<b>Actual Nov 2018 £000</b>	<b>Forecast Outturn Variance £000</b>
-159	Adults & Safeguarding	153,831	91,812	132
332	Adults Commissioning (including Local Assistance Scheme)	10,590	18,344	332
<b>172</b>	<b>Total Expenditure</b>	<b>164,421</b>	<b>110,156</b>	<b>464</b>
0	Grant Funding (including Better Care Fund, Social Care in Prisons Grant etc.)	-39,664	-27,794	0
<b>172</b>	<b>Total</b>	<b>124,757</b>	<b>82,362</b>	<b>464</b>

**Please note:** Strategic Management – Commissioning covers all of P&C and is therefore not included in the table above. The Executive Director and Central Financing budgets are now reported to CYP Committee as they contain items material to services under the oversight of that committee.

## 1.4 Financial Context

As previously discussed at Adults Committee the major savings agenda continues with £99.2m of savings required across the Council between 2017 and 2022. The total planned savings for P&C in the 2018/19 financial year total £21,287k.

Although significant savings are expected to be made in 2018/19 across the directorate, Adults services continue to face demand and price pressures, particularly:

- In Older People's services where lack of capacity in the domiciliary and residential care markets is driving up prices
- Through increased demand in the NHS and improved performance in reducing delays in transfers of care
- In Learning Disability services, where the needs of a relatively static number of service-users is increasing

Central government has recognised pressures in the social care system through a number of temporary ring-fenced grants given to local authorities and these are able to be used to offset

pressures, make investments into social work to bolster the social care market or reduce demand on health and social care services. Further funding has recently been announced and the Council has drawn up plans to spend this funding addressing the above pressures mainly with a focus on providing additional domiciliary care.

## **2.0 MAIN ISSUES IN THE NOVEMBER 2018 P&C FINANCE & PERFORMANCE REPORT**

### **2.1 Revenue**

At the end of November, People & Communities overall is forecasting an overspend of £4.4m, which is increased from a forecast £4m in October's report.

The increase in forecast is mainly within lines relating to Adults Committee, which are forecasting an overspend of £464k – this is an increase of £292k since October's report.

The causes of the forecast overspend position remain fundamentally unchanged, principally being pressures on care spend within Learning Disability and Older People's services as well as slower than anticipated delivery of certain savings programmes with an expectation that work will continue into 2019/20 and deliver over a revised timescale. Additional savings have been identified in-year as part of the 'funnel' process reported to Committee periodically in the Savings Tracker to partially mitigate these pressures.

In November:

- A further £243k of pressure is forecast in the Council's share of the Learning Disability Partnership (LDP), which is a pooled budget with the NHS. Monthly cost increases from changes to existing care packages are continuing to exceed the level expected when budgets were set. Savings delivery remains good against expectations that were revised at the start of the year, and dedicated commissioning capacity for the LDP is mitigating the impact of price increases.
- A further £544k of pressure is forecast in Older People and Physical Disability Services. The unit costs of residential and nursing care are continuing to increase, as are numbers of people in the most expensive types of care particularly nursing. This partially expected as we head into winter, but the starting point is higher than anticipated as prices have risen throughout the year to date. The key activity data for Older People in section 2.5.5 of the main report shows how unit costs in November are higher than budget for residential and nursing care, and the graph shows the steady increase in prices and, to a lesser extent, numbers of people receiving this care.
  - Extra investment made over Winter, including the Winter Pressures grant from central government (known as the 'Hancock' grant) should mitigate the impact of increasing prices by providing more domiciliary care capacity but cannot prevent them.

These pressures are partially mitigated by additional underspends identified in other budgets within Adults Services – a further £350k has been applied in November to mitigate price and demand increases.

### **2.2 Performance**

The performance information in the November F&PR relates to information up to the end of October.

Of the performance indicators linked to Adults Committee, two are showing as red:

1. Proportion of adults with a primary support reason of learning disability support in paid employment (year to date)
2. Average monthly number of bed day delays (social care attributable) per 100,000 18+ population

Committee has been updated at recent meetings on the actions that are in place to tackle these red indicators.

### **3.0 ALIGNMENT WITH CORPORATE PRIORITIES**

#### **3.1 Developing the local economy for the benefit of all**

3.1.1 There are no significant implications for this priority.

#### **3.2 Helping people live healthy and independent lives**

3.2.1 There are no significant implications for this priority

#### **3.3 Supporting and protecting vulnerable people**

3.3.1 There are no significant implications for this priority

### **4.0 SIGNIFICANT IMPLICATIONS**

#### **4.1 Resource Implications**

4.1.1 This report sets out details of the overall financial position of the P&C Service.

#### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

4.2.1 There are no significant implications within this category.

#### **4.3 Statutory, Risk and Legal Implications**

4.3.1 There are no significant implications within this category.

#### **4.4 Equality and Diversity Implications**

4.4.1 There are no significant implications within this category.

#### **4.5 Engagement and Consultation Implications**

4.5.1 There are no significant implications within this category.

#### **4.6 Localism and Local Member Involvement**

4.6.1 There are no significant implications within this category.

#### **4.7 Public Health Implications**

4.7.1 There are no significant implications within this category.

Source Documents	Location
As well as presentation of the F&PR to the Committee when it meets, the report is made available online each month.	<a href="https://www.cambridgeshire.gov.uk/council/finance-and-budget/finance-&amp;-performance-reports/">https://www.cambridgeshire.gov.uk/council/finance-and-budget/finance-&amp;-performance-reports/</a>

## **Appendix A**

### **Adults Committee Revenue Budgets within the Finance & Performance report**

#### **Adults & Safeguarding Directorate**

Strategic Management – Adults  
Principal Social Worker, Practice and Safeguarding  
Autism and Adult Support  
Carers

#### **Learning Disability Services**

LD Head of Services  
LD - City, South and East Localities  
LD - Hunts & Fenland Localities  
LD – Young Adults  
In House Provider Services  
NHS Contribution to Pooled Budget

#### **Older People and Physical Disability Services**

OP - City & South Locality  
OP - East Cambs Locality  
OP - Fenland Locality  
OP - Hunts Locality  
Neighbourhood Cares  
Discharge Planning Teams  
Shorter Term Support and Maximising Independence  
Physical Disabilities

#### **Mental Health**

Mental Health Central  
Adult Mental Health Localities  
Older People Mental Health

#### **Commissioning Directorate**

Strategic Management – Commissioning – *covers all of P&C*  
Local Assistance Scheme

#### **Adults Commissioning**

Central Commissioning - Adults  
Integrated Community Equipment Service  
Mental Health Voluntary Organisations

#### **Executive Director**

Executive Director - *covers all of P&C*  
Central Financing - *covers all of P&C*

#### **Grant Funding**

Non Baselined Grants - *covers all of P&C*

From: Martin Wade and Stephen Howarth  
 Tel.: 01223 699733 / 714770  
 Date: 10<sup>th</sup> December 2018

## **People & Communities (P&C) Service**

### **Finance and Performance Report – November 2018**

## **1. SUMMARY**

### **1.1 Finance**

<b>Previous Status</b>	<b>Category</b>	<b>Target</b>	<b>Current Status</b>	<b>Section Ref.</b>
<b>Red</b>	Income and Expenditure	Balanced year end position	<b>Red</b>	2.1
<b>Green</b>	Capital Programme	Remain within overall resources	<b>Green</b>	3.2

### **1.2. Performance Indicators – October 2018 Data (see sections 4&5)**

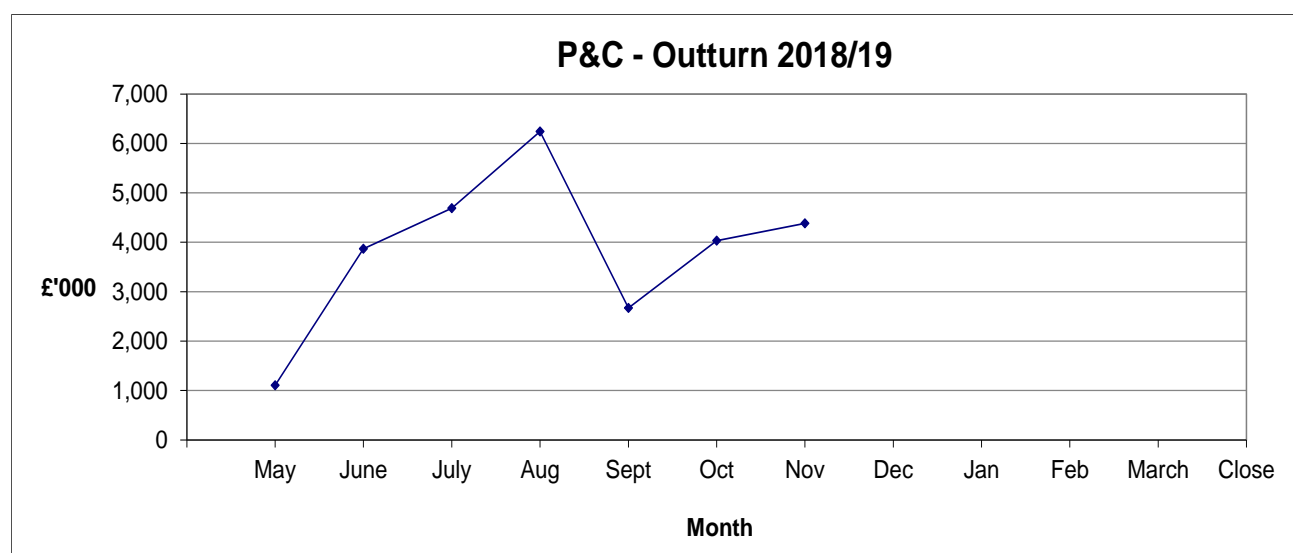
<b>Monthly Indicators</b>	<b>Red</b>	<b>Amber</b>	<b>Green</b>	<b>No Target</b>	<b>Total</b>
October 17/18 Performance (No. of indicators)	9	9	6	14	38

## **2. INCOME AND EXPENDITURE**

### **2.1 Overall Position**

<b>Forecast Variance Outturn (Oct) £000</b>	<b>Directorate</b>	<b>Budget 2018/19 £000</b>	<b>Actual £000</b>	<b>Forecast Outturn Variance £000</b>	<b>Forecast Outturn Variance %</b>
-159	Adults & Safeguarding	153,831	91,812	132	0.1%
5,131	Commissioning	44,215	39,781	5,131	11.6%
-50	Communities & Safety	6,982	4,713	-46	-0.7%
1,510	Children & Safeguarding	52,066	35,184	1,547	3.0%
7,323	Education	79,736	30,885	7,383	9.3%
-3,159	Executive Director	4,336	547	-3,159	-72.9%
<b>10,596</b>	<b>Total Expenditure</b>	<b>341,165</b>	<b>202,921</b>	<b>10,988</b>	<b>3.2%</b>
-6,565	Grant Funding	-97,914	-66,627	-6,607	6.7%
<b>4,031</b>	<b>Total</b>	<b>243,251</b>	<b>136,294</b>	<b>4,382</b>	<b>1.8%</b>

The service level finance & performance report for 2018/19 can be found in [appendix 1](#). Further analysis of the forecast position can be found in [appendix 2](#).



## 2.2 Significant Issues

At the end of November 2018, the overall P&C position is an overspend of £4,382k.

Significant issues are detailed below:

### Adults

Within Adults and Safeguarding, care budgets are increasingly under pressure from higher than expected cost increases, growing demand for services, and increasing complexity of the cohort of people in receipt of care:

- Large care pressures continue to be reported in the Learning Disability Partnership, with the forecast variance on the Council's share of the pooled budget overspend increasing in November to reach £2.56m. Increases in the forecast position for the LDP in the last several months including November have been due to changes in care costs, especially nursing care – demand for services, mainly through changing needs of existing service-users, has consistently exceeded the monthly expectation on which budgets were based. Part of the overall pressure relates to delays to savings plans, with some expected to be delivered in 2019/20 instead of in-year, but savings delivery remains good and on track for the revised phasing.
- Older People and Physical Disability Services is forecast to have a pressure of around £922k. Unit costs of all types of care are generally increasing month-on-month and the mix of placements is shifting towards more expensive care types, especially nursing care. This is partially due to moving into winter, as well as work to accelerate discharges from hospitals, and is exacerbated by constrained capacity in the domiciliary care market. Work is underway to address these issues, particularly the latter, with funding announced by central government in the recent budget.

The financial position in Adults services is partially offset by application of grant funding received from central government for the mitigation of pressures on the social care system. Parts of these grants were specifically earmarked against emerging demand pressures, and further funding has been identified from other



spend lines that have not happened or where there has been slippage. This grant funding appears on the 'Strategic Management – Adults' budget line.

## 2.3 Additional Income and Grant Budgeted this Period

(De Minimis reporting limit = £160,000)

A full list of additional grant income anticipated and reflected in this report can be found in [appendix 3](#).

## 2.4 Virements and Transfers to / from Reserves (including Operational Savings Reserve) (De Minimis reporting limit = £160,000)

A list of virements made in the year to date can be found in [appendix 4](#).

## 2.5 Key Activity Data

The Actual Weekly Costs for all clients shown in section 2.5.1-2 are calculated based on all clients who have received a service, are receiving a service, or we plan will receive a service. Some clients will have ceased receiving a service in previous months, or during this month, or we will have assumed an end date in the future.

### 2.5.1 Key activity data to November 2018 for **Looked After Children (LAC)** is shown below:

	BUDGET				ACTUAL (November)				VARIANCE		
Service Type	No of placements Budgeted	Annual Budget	No. of weeks funded	Average weekly cost per head	Snapshot of No. of placements November 18	Yearly Average	Forecast Outturn	Average weekly cost per head	Yearly Average budgeted no. of placements	Net Variance to Budget	Average weekly cost diff +/-
Residential - disability	1	£132k	52	2,544.66	2	1.84	£368k	3,537.43	0.84	£236k	992.77
Residential - secure accommodation	0	£k	52	0.00	0	0.47	£156k	5,908.00	0.47	£156k	5,908.00
Residential schools	16	£2,277k	52	2,716.14	19	16.70	£2,379k	2,887.95	0.7	£102k	171.81
Residential homes	39	£6,725k	52	3,207.70	34	34.12	£5,998k	3,536.48	-4.88	-£728k	328.78
Independent Fostering	199	£9,761k	52	807.73	293	287.13	£11,834k	798.53	88.13	£2,073k	-9.20
Supported Accommodation	31	£2,355k	52	1,466.70	24	22.66	£1,366k	1,317.07	-8.34	-£989k	-149.63
16+	8	£89k	52	214.17	5	5.10	£92k	312.86	-2.9	£3k	98.69
Growth/Replacement	-	£k	-	-	-	-	£621k	-	-	£621k	-
Pressure funded within directorate	-	-£1,526k	-	-	-	-	£k	-	-	£1,526k	-
<b>TOTAL</b>	<b>294</b>	<b>£19,813k</b>			<b>377</b>	<b>368.02</b>	<b>£22,813k</b>		<b>74.02</b>	<b>£3,000k</b>	
In-house fostering - Basic	191	£1,998k	56	181.30	205	190.85	£1,943k	179.00	-0.15	-£55k	-2.30
In-house fostering - Skills	191	£1,760k	52	177.17	209	200.34	£1,788k	179.38	9.34	£29k	2.21
Kinship - Basic	40	£418k	56	186.72	43	42.16	£439k	186.89	2.16	£20k	0.17
Kinship - Skills	11	£39k	52	68.78	25	15.73	£47k	47.76	4.73	£8k	-21.02
In-house residential	5	£603k	52	2,319.99	0	1.33	£431k	3,117.39	-3.67	-£172k	797.40
Growth	0	£k	-	0.00	0	0.00	£k	0.00	-	£k	-
<b>TOTAL</b>	<b>236</b>	<b>£4,818k</b>			<b>248</b>	<b>234.34</b>	<b>£4,648k</b>		<b>-1.66</b>	<b>-£170k</b>	
Adoption Allowances	105	£1,073k	52	196.40	107	106.90	£1,161k	195.34	1.9	£89k	-1.06
Special Guardianship Orders	246	£1,850k	52	144.64	251	247.72	£1,840k	142.61	1.72	-£10k	-2.03
Child Arrangement Orders	91	£736k	52	157.37	88	90.69	£723k	153.66	-0.31	-£13k	-3.71
Concurrent Adoption	5	£91k	52	350.00	5	4.93	£90k	350.00	-0.07	-£1k	0.00
<b>TOTAL</b>	<b>447</b>	<b>£3,750k</b>			<b>451</b>	<b>450.24</b>	<b>£3,814k</b>		<b>1.9</b>	<b>£64k</b>	
<b>OVERALL TOTAL</b>	<b>977</b>	<b>£28,382k</b>			<b>1076</b>	<b>1,052.60</b>	<b>£31,276k</b>		<b>74.26</b>	<b>£2,894k</b>	

NOTE: In house Fostering and Kinship basic payments fund 56 weeks as carers receive two additional weeks payment during the Summer holidays, one additional week payment at Christmas and a birthday payment.

## 2.5.2 Key activity data to the end of November for **SEN Placements** is shown below:

BUDGET				ACTUAL (November 18)				VARIANCE			
Ofsted Code	No. of Placements Budgeted	Total Cost to SEN Placements Budget	Average annual cost	No. of Placements November 18	Yearly Average	Total Cost to SEN Placements Budget	Average Annual Cost	No of Placements	Yearly Average	Total Cost to SEN Placements Budget	Average Annual Cost
Autistic Spectrum Disorder (ASD)	98	£6,165k	£63k	98	99.55	£6,399k	£64k	0	1.55	£234k	£1k
Hearing Impairment (HI)	3	£100k	£33k	3	3.00	£121k	£40k	0	0.00	£21k	£7k
Moderate Learning Difficulty (MLD)	3	£109k	£36k	8	9.07	£137k	£15k	5	6.07	£28k	-£21k
Multi-Sensory Impairment (MSI)	1	£75k	£75k	0	0.00	£0k	-	-1	-1.00	-£75k	£k
Physical Disability (PD)	1	£19k	£19k	4	4.34	£76k	£18k	3	3.34	£57k	-£1k
Profound and Multiple Learning Difficulty (PMLD)	1	£41k	£41k	1	0.99	£67k	£68k	0	-0.01	£26k	£26k
Social Emotional and Mental Health (SEMH)	35	£1,490k	£43k	45	46.89	£2,136k	£46k	10	11.89	£646k	£3k
Speech, Language and Communication Needs (SLCN)	3	£163k	£54k	2	2.00	£88k	£44k	-1	-1.00	-£76k	-£11k
Severe Learning Difficulty (SLD)	2	£180k	£90k	4	3.73	£388k	£104k	2	1.73	£207k	£14k
Specific Learning Difficulty (SPLD)	8	£164k	£20k	9	7.66	£233k	£30k	1	-0.34	£69k	£10k
Visual Impairment (VI)	2	£64k	£32k	2	2.00	£57k	£29k	0	0.00	-£7k	-£4k
Growth / (Saving Requirement)	-	£1,000k	-	-	-	£388k	-	-	-	-£612k	-
<b>TOTAL</b>	<b>157</b>	<b>£9,573k</b>	<b>£61k</b>	<b>176</b>	<b>179.23</b>	<b>£10,091k</b>	<b>£54k</b>	<b>19</b>	<b>22.23</b>	<b>£518k</b>	<b>-£7k</b>

In the following key activity data for Adults & Safeguarding, the information given in each column is as follows:

- Budgeted number of clients: this is the number of full-time equivalent (52 weeks) service users anticipated at budget setting, given budget available
- Budgeted average unit cost: this is the planned unit cost per service user per week, given the budget available
- Actual service users and cost: these figures are derived from a snapshot of the commitment record at the end of the month and reflect current numbers of service users and average cost

The forecasts presented in Appendix 1 reflect the estimated impact of savings measures to take effect later in the year. The “further savings within forecast” lines within these tables reflect the remaining distance from achieving this position based on current activity levels.

## 2.5.3 Key activity data to end of November for **Learning Disability Services** is shown below:

		BUDGET			ACTUAL (November 18)				Year End		
Service Type		Expected No. of Service Users 2018/19	Budgeted Average Unit Cost (per week) £	Annual Budget £000	Current Service Users	DoT	Current Average Unit Cost (per week) £	D	Forecast Actual £000	D	Variance £000
Learning Disability Services	Residential	299	£1,381	£21,465k	281	↔	£1,477	↑	£22,450k	↓	£985k
	Nursing	8	£1,675	£697k	8	↔	£1,694	↔	£720k	↓	£23k
	Community	1,285	£666	£44,503k	1,316	↑	£692	↑	£48,196k	↑	£3,693k
<b>Learning Disability Service Total</b>		<b>1,592</b>		<b>£66,665k</b>	<b>1,605</b>				<b>£71,366k</b>		<b>£4,701k</b>
<b>Income</b>				-£2,814k					-£3,250k	↑	-£437k
<b>Further savings assumed within forecast as shown in Appendix 1</b>											-£754k
<b>Net Total</b>				<b>£63,851k</b>							<b>£3,510k</b>

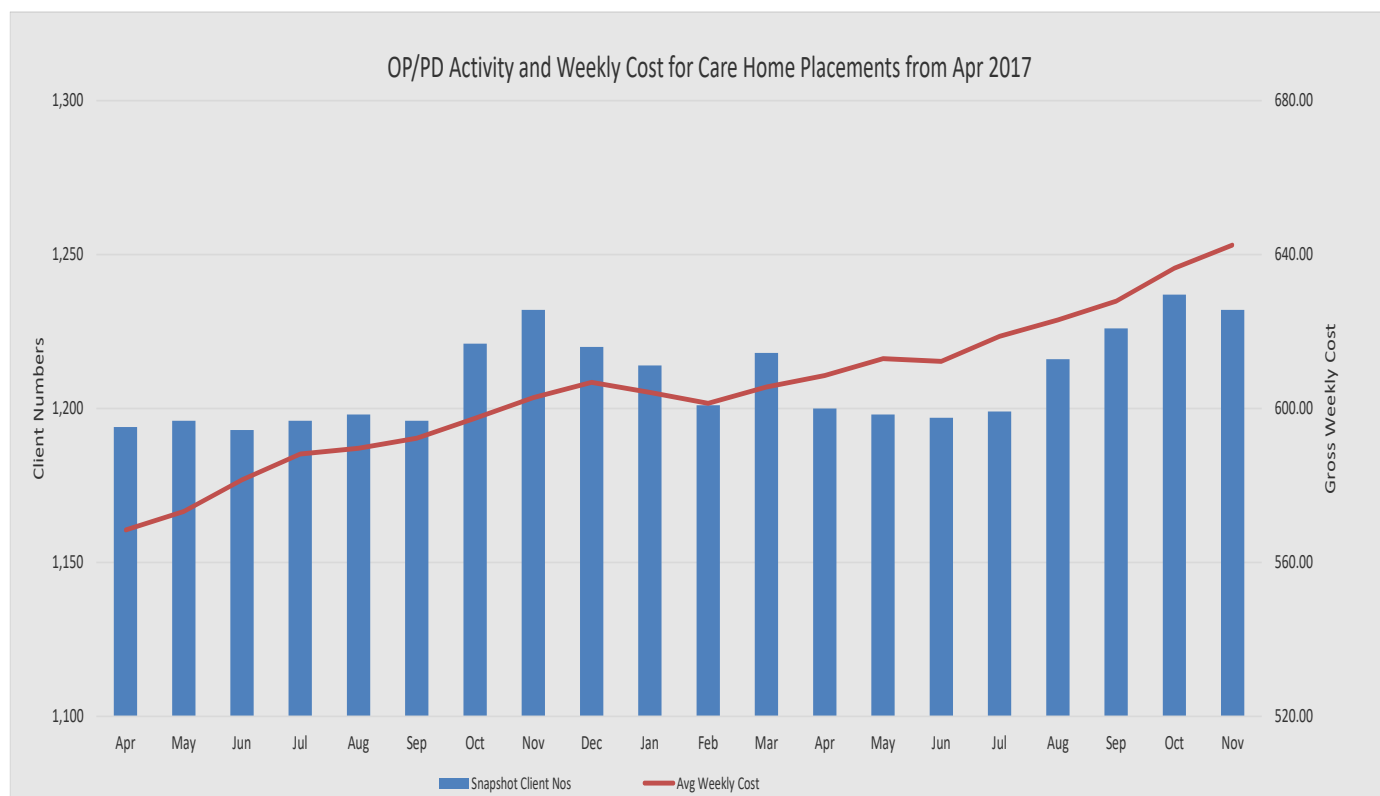
**2.5.4 Key activity data to end of November for Adult Mental Health Services is shown below:**

		BUDGET			ACTUAL (November)				Year End		
Service Type		Expected No. of Service Users 2018/19	Budgeted Average Unit Cost (per week) £	Annual Budget £000's	Current Service Users	D o T	Current Average Unit Cost (per week) £	D o T	Forecast Actual £000's	D o T	Variance £000's
Adult Mental Health	Community based support	11	£127	£71k	6	↔	£57	↔	£36k	↓	-£34k
	Home & Community support	164	£100	£857k	147	↓	£104	↑	£783k	↓	-£74k
	Nursing Placement	14	£648	£457k	16	↓	£684	↓	£585k	↓	£127k
	Residential Placement	75	£690	£2,628k	66	↓	£650	↓	£2,290k	↓	-£338k
	Supported Accommodation	130	£120	£792k	135	↔	£171	↔	£1,126k	↓	£333k
	Direct Payments	12	£288	£175k	14	↔	£233	↔	£211k	↔	£36k
<b>Total Expenditure</b>		<b>406</b>		<b>£4,980k</b>	<b>384</b>				<b>£5,030k</b>		<b>£50k</b>
Health Contribution				-£298k					-£183k		£115k
Client Contribution				-£234k					-£364k		-£130k
<b>Total Income</b>				<b>-£532k</b>					<b>-£547k</b>		<b>-£15k</b>
<b>Adult Mental Health Net Total</b>		<b>406</b>		<b>£4,448k</b>	<b>384</b>				<b>£4,483k</b>		<b>£35k</b>

Direction of travel compares the current month to the previous month.

**2.5.5 Key activity data to the end of November for Older People (OP) Services is shown below:**

OP Total		BUDGET			ACTUAL (November 18)				Year End		
Service Type		Expected No. of Service Users 2018/19	Budgeted Average Unit Cost (per week) £	Annual Budget £000	Current Service Users	D o T	Current Average Unit Cost (per week) £	D o T	Forecast Actual £000	D o T	Variance £000
Residential		514	£541	£14,855k	472	↑	£573	↑	£14,902k	↑	£47k
Residential Dementia		389	£554	£11,492k	374	↓	£572	↑	£11,528k	↑	£36k
Nursing		312	£750	£12,508k	296	↑	£788	↑	£13,273k	↑	£765k
Nursing Dementia		62	£804	£2,640k	90	↑	£824	↓	£2,802k	↑	£161k
Respite				£1,558k					£1,694k	↓	£136k
Community based											
~ Direct payments		538	£286	£8,027k	497	↓	£331	↑	£8,272k	↓	£244k
~ Day Care				£1,095k					£1,053k	↑	-£42k
~ Other Care				£4,893k					£4,948k	↑	£55k
~ Homecare arranged		1,516	per hour £16.31	£14,865k	1,399	↓	per hour £16.15	↑	£14,210k	↓	-£655k
~ Live In Care arranged		50		£2,086k	50	↔	£778.90	↑	£2,047k	↑	-£38k
<b>Total Expenditure</b>		<b>3,381</b>		<b>£74,018k</b>	<b>3,128</b>				<b>£74,728k</b>		<b>£710k</b>
Residential Income				-£10,331k					-£9,468k	↓	£863k
Community Income				-£8,811k					-£9,218k	↓	-£408k
Health Income				-£651k					-£964k	↓	-£313k
<b>Total Income</b>				<b>-£19,793k</b>					<b>-£19,651k</b>		<b>£142k</b>



### 2.5.6 Key activity data to the end of November for **Older People Mental Health (OPMH)** Services is shown below:

For both Older People's Services and Older People Mental Health:

- Respite care budget is based on clients receiving 6 weeks care per year instead of 52.
- Day Care OP Block places are also used by OPMH clients, therefore there is no day care activity in OPMH

Although this activity data shows current expected and actual payments made through direct payments, this in no way precludes increasing numbers of clients from converting arranged provisions into a direct payment.

OPMH Total	BUDGET			ACTUAL (November 18)				Year End		
Service Type	Expected No. of Service Users 2018/19	Budgeted Average Unit Cost (per week) £	Annual Budget £000	Current Service Users	Difference	Current Average Unit Cost (per week) £	Difference	Forecast Actual £000	Difference	Variance £000
Residential	27	£572	£801k	18	↑	£519	↓	£789k	↑	-£13k
Residential Dementia	26	£554	£740k	23	↓	£620	↑	£728k	↑	-£12k
Nursing	29	£648	£992k	17	↑	£640	↑	£890k	↓	-£102k
Nursing Dementia	84	£832	£3,720k	82	↓	£843	↑	£3,338k	↓	-£383k
Respite			£4k					£26k	↑	£22k
Community based										
~ Direct payments	13	£366	£241k	6	↔	£392	↓	£218k	↓	-£24k
~ Day Care			£4k					£4k	↔	£k
~ Other Care			£44k					£45k	↑	£1k
~ Homecare arranged	50	per hour £16.10	£445k	33	↓	per hour £16.83	↓	£426k	↓	-£19k
~ Live In Care arranged	4		£185k	3	↔	£869.48	↔	£152k	↔	-£33k
<b>Total Expenditure</b>	<b>229</b>		<b>£6,991k</b>	<b>179</b>				<b>£6,616k</b>		<b>-£528k</b>
Residential Income			-£1,049k					-£604k	↑	£445k
Community Income			-£97k					-£346k	↑	-£249k
Health Income			-£281k					-£16k	↓	£265k
<b>Total Income</b>			<b>-£1,427k</b>					<b>-£966k</b>		<b>£460k</b>

### **3. BALANCE SHEET**

#### **3.1 Reserves**

A schedule of the planned use of Service reserves can be found in [appendix 5](#).

#### **3.2 Capital Expenditure and Funding**

##### 2018/19 In Year Pressures/Slippage

As at the end of November 2018 the capital programme forecast underspend continues to be zero. The level of slippage has not exceeded the revised Capital Variation budget of £10,469k. A forecast outturn will only be reported once slippage exceeds this level. However in September movements on schemes has occurred totaling £433k. The significant changes in schemes are detailed below;

- Fulbourn Primary School: £300k accelerated spend as the scheme is progressing on site ahead of schedule.
- Chatteris Primary School; £150k slippage due to the delay in the start of works, this will have no impact on the completion date of summer 2020.
- Cambourne Village College; £333k accelerated spend as enabling works for the site and the haul road have begun approximately 6 weeks ahead of originally anticipated.

A detailed explanation of the position can be found in [appendix 6](#).

### **4. PERFORMANCE**

The detailed Service performance data can be found in [appendix 7](#) along with comments about current concerns.

The performance measures included in this report have been developed in conjunction with the Peoples & Communities management team and link service activity to key Council outcomes. The revised set of measures includes 15 of the previous set and 23 that are new. The measures in this report have been grouped by outcome, then by responsible directorate. The latest available benchmarking information has also been provided in the performance table where it is available. This will be revised and updated as more information becomes available. Work is ongoing with service leads to agree appropriate reporting mechanisms for the new measures included in this report and to identify and set appropriate targets.

A recent workshop held with the Adults & Safeguarding management team resulted in new targets being proposed for some measures, and the replacement of some existing measures with more useful and more illustrative alternatives. The proposed changes are:-

- Set a target of 87% for the “proportion of adult safeguarding enquiries where outcomes were at least partially achieved”. This is in line with the regional average. (Subject to performance in the national release of adult safeguarding data in November 2018.)
- Set a target of 86.3% for the “proportion of people who use services who say that they have made them feel safer”. This target is in line with the national average as given in the recent Adult Social Care Outcomes Framework (ASCOF) data release.
- Remove “proportion of people finishing a reablement episode as independent” and replace it with the national indicator ASCOF 2D which measures the proportion of new clients for whom the outcome of short-term services was not a

long-term service. This gives a good indication of the effectiveness of preventative services such as Reablement, and allows for comparison with other local authorities for benchmarking purposes. The proposed target for this measure is the England average of 77.8%

- Remove “Number of Community Action Plans completed in the period” and replace it with “Proportion of requests for support where the outcome was signposting, information or advice only”. This indicator is based on nationally reported data allowing for comparisons against other local authorities. The proposed target is the regional average of 55%.
- Remove “Number of assessments for long-term care completed in period” and replace it with “Number of new people receiving long-term care per 100,000 of population. This indicator is based on nationally reported data allowing for comparisons against other local authorities. It is proposed that the target be set as 408, level with the Eastern region average.
- Set a target of 27% for the “proportion of adults receiving direct payments”. This target is in line with the average for the Eastern region.
- Remove “Proportion of carers receiving direct payments” and replace it with “Proportion of carers who are satisfied with the support or services that they have received from social services in the last 12 months”, which is collected as part of the biennial carer survey. This allows for national comparisons with other local authority groups. It is proposed that the average score of local authorities in Cambridgeshire’s comparator group is used as the target for this measure. The 2018/2019 Carer Survey is currently underway.

#### **Nine indicators are currently showing as RED:**

- **% of children whose referral to social care occurred within 12 months of a previous referral**

Re-referrals to children's social care decreased this month but remained above target. It is below average in comparison with statistical neighbours and the England average.

- **Number of children with a Child Protection (CP) Plan per 10,000 children**

During October we saw the numbers of children with a Child Protection plan increase from 495 to 498.

The introduction of an Escalation Policy for all children subject to a Child Protection Plan was introduced in June 2017. Child Protection Conference Chairs raise alerts to ensure there is clear planning for children subject to a Child Protection Plan. This has seen a decrease in the numbers of children subject to a Child Protection Plan.

- **Proportion of children subject to a Child Protection (CP) Plan for the second or subsequent time (within 2 years)**

In October there were 8 children subject to a child protection plan for the second or subsequent time. The rate is favourable in comparison to statistical neighbours and the England average, however it is above target this month. NOTE: Target added in July 2018.

- **The number of Looked After Children per 10,000 children**

At the end of October there were 756 children who were looked after by the Local Authority and of these 88 were unaccompanied asylum seeking children and young people. Cambridgeshire are supporting 105 care leavers who were previously assessed as being unaccompanied asylum seeking children and 32 adult asylum seekers whose claims have not reached a conclusion. These adults have been waiting between one and three years for a status decision to be made by the Home Office.

Actions being taken include:

- There is currently a review underway of the Threshold to Resources Panel (TARP) which is chaired by the Assistant Director for Children's Services. The panel is designed to review children on the edge of care, specifically looking to prevent escalation by providing timely and effective interventions. The intention is to streamline a number of District and Countywide Panels to ensure close scrutiny of thresholds and use of resources but also to provide an opportunity for collaborative working across services to improve outcomes for children. It is proposed that the new panel structure will be in place for the implementation of the Change for Children transformation.
  - A county wide Legal Tracker is in place which tracks all children subject to the Public Law Outline (pre proceedings), Care Proceedings and children accommodated by the Local Authority with parental agreement. This is having a positive impact on the care planning for Cambridgeshire's most vulnerable children, for example in the identification of wider family members in pre-proceedings where there are concerns that is not safe for children to remain in the care of their parents. In addition a monthly Permanency Tracker Meeting considers all children who are looked after, paying attention to their care plan, ensuring reunification is considered and if this is not possible a timely plan is made for permanence via Special Guardianship Order, Adoption or Long Term Fostering. The multi-agency Unborn Baby Panel operational in the South and North of the County monitors the progress of care planning, supporting timely decision making and permanency planning.
  - Monthly Placement Strategy, Finance and Looked After Children Savings Meetings are now operational and attended by representatives across Children's Social Care, Commissioning and Finance. The purpose of these meetings is to provide increased scrutiny on financial commitments for example placements for looked after children, areas of specific concern and to monitor savings targets. This meetings reports into the People and Communities Delivery Board.
  - Supporting this activity, officers in Children's Social Care and Commissioning are holding twice weekly placement forum meetings which track and scrutinise individual children's care planning and placements. These meetings, led by Heads of Service have positively impacted on a number of looked after children who have been consequently been able to move to an in house and in county foster care placement, plans have been made to de-escalate resources in a timely way or children have returned to live with their family. In Cambridgeshire we have 74% of our looked after children in foster care as opposed to 78% nationally and 42% of these children are placed with in-house carers as opposed to 58% in external placements.
- **Average monthly number of bed day delays (social care attributable) per 100,000 18+ population**

In September 2018, there were 724 ASC-attributable bed-day delays recorded in Cambridgeshire. For the same period the previous year there were 849 delays – a 15% reduction. The Council is continuing to invest considerable amounts of staff and management time into improving processes, identifying clear performance targets and clarifying roles & responsibilities. We continue to work in collaboration with health colleagues to ensure correct and timely discharges from hospital.

Delays in arranging residential, nursing and domiciliary care for patients being discharged from Addenbrooke's remain the key drivers of ASC bed-day delays.

- **Proportion of Adults with Learning Disabilities in paid employment**

Performance remains low. As well as a requirement for employment status to be recorded, unless a service user has been assessed or reviewed in the year, the information cannot be considered current. Therefore this indicator is also dependent on the review/assessment performance of LD teams. (N.B: This indicator is subject to a cumulative effect as clients are reviewed within the period.) No new data is currently available for this measure during ongoing migration of service data to Mosaic system.

- **Percentage of EHCP assessments completed within timescale**

There has been a higher number of requests for EHCPs this year, compared to previous years. This has had an impact on the timescales for completing assessments and issuing plans.

In addition the team has experienced high staff turnover and sickness this year both of which have resulted in reduced capacity within the team.

Actions being implemented are:

- 3 new statutory assessment Casework Officers have joined the team and induction and training is underway
- A Crisis management plan is being implemented for Business Support. This includes the recruitment of additional staff to clear backlog and manage the day-to-day demands

- **Percentage of disadvantaged households taking up funded 2 year old childcare places**

Performance decreased by just under 4 percentage points in comparison to the previous figure for the spring 2018 term. The annual figure reported by the DFE is 68% for 2018 which below both the statistical neighbour average and the England average. The previous figure for 2017 was 79%.

The DFE estimate there were 1700 Cambridgeshire two year olds eligible for funded early education in 2018. Of those eligible there were 1140 two year olds taking up the funded early education. 95.6% of these met the economic basis for funding criteria. The remaining 4.4% of two years olds met the criteria on a high-level SEN or disability basis or the looked after or adopted from care basis.

- **Ofsted – Pupils attending special schools that are judged as Good or Outstanding**

Although performance has decreased by 2.6 percentage points since last month there have been no changes to Ofsted ratings and the change in the percentage figure is due to changes in pupil numbers at the special schools at the start of the new school year. There has been an increase of 57 pupils in the five schools rated as good or outstanding and an increase of 33 children in the two schools rated as requiring improvement and this has been enough to change the overall percentage for this indicator.

There are currently 2 schools which received an overall effectiveness grading of requiring improvement and 137 pupils attend these schools in total.

Both the national figure and the statistical neighbour figures have decreased slightly.



## APPENDIX 1 – P&C Service Level Budgetary Control Report

Forecast Outturn Variance (Oct) £'000		Service	Budget 2018/19 £'000	Actual Nov 2018 £'000	Forecast Outturn Variance £'000   %	
Adults & Safeguarding Directorate						
-2,486	1	Strategic Management - Adults	7,578	-6,762	-2,916	-38%
-0		Principal Social Worker, Practice and Safeguarding	1,575	999	0	0%
-76		Autism and Adult Support	925	449	-90	-10%
-150	2	Carers	661	276	-200	-30%
<u>Learning Disability Partnership</u>						
1,201	3	LD Head of Service	3,614	2,889	1,176	33%
807	3	LD - City, South and East Localities	34,173	23,539	762	2%
634	3	LD - Hunts & Fenland Localities	29,543	19,816	1,014	3%
322	3	LD - Young Adults	5,790	3,815	331	6%
50	3	In House Provider Services	6,071	3,943	46	1%
-699	3	NHS Contribution to Pooled Budget	-18,387	-13,790	-772	-4%
<u>Older People and Physical Disability Services</u>						
364	4	Physical Disabilities	11,352	8,445	371	3%
737	4	OP - City & South Locality	19,238	13,125	885	5%
564	4	OP - East Cambs Locality	6,001	4,358	364	6%
12	4	OP - Fenland Locality	9,186	5,626	-132	-1%
-1,260	4	OP - Hunts Locality	12,281	8,046	-655	-5%
-122	4	Neighbourhood Cares	710	296	7	1%
0	4	Discharge Planning Teams	1,872	1,561	0	0%
83	4	Shorter Term Support and Maximising Independence	7,958	6,119	83	1%
<u>Mental Health</u>						
-90		Mental Health Central	368	536	-90	-24%
264		Adult Mental Health Localities	6,821	4,253	42	1%
-315		Older People Mental Health	6,503	4,275	-93	-1%
-159		Adult & Safeguarding Directorate Total	153,831	91,812	132	0%
Commissioning Directorate						
-0		Strategic Management –Commissioning	879	777	-0	0%
-0		Access to Resource & Quality	978	453	-0	0%
-10		Local Assistance Scheme	300	141	-10	-3%
<u>Adults Commissioning</u>						
333	5	Central Commissioning - Adults	5,635	15,722	333	6%
0		Integrated Community Equipment Service	925	-124	0	0%
8		Mental Health Voluntary Organisations	3,730	2,605	8	0%
<u>Childrens Commissioning</u>						
3,000	6	Looked After Children Placements	19,813	13,835	3,000	15%
0		Commissioning Services	2,452	1,371	0	0%
1,500	7	Home to School Transport – Special	7,871	4,053	1,500	19%
300	8	LAC Transport	1,632	947	300	18%
5,131		Commissioning Directorate Total	44,215	39,781	5,131	12%

Forecast Outturn Variance (Oct) £'000	Service	Budget 2018/19  £'000	Actual Nov 2018  £'000	Forecast Outturn Variance  £'000   %	
Communities & Safety Directorate					
0	Strategic Management - Communities & Safety	-38	89	0	-61%
-50	Youth Offending Service	1,650	963	-50	-3%
0	Central Integrated Youth Support Services	1,407	603	0	0%
0	Safer Communities Partnership	947	678	0	2%
0	Strengthening Communities	521	410	0	1%
0	Adult Learning & Skills	2,494	1,968	0	0%
-50	Communities & Safety Directorate Total	6,982	4,713	-50	-1%
Children & Safeguarding Directorate					
0	Strategic Management – Children & Safeguarding	3,774	2,587	0	0%
0	Partnerships and Quality Assurance	1,988	1,430	75	4%
1,262	<sup>9</sup> Children in Care	14,807	11,297	1,224	8%
0	Integrated Front Door	2,676	1,877	0	0%
0	Children’s Centre Strategy	58	-2	0	0%
0	Support to Parents	2,870	224	0	0%
248	<sup>10</sup> Adoption Allowances	5,282	3,972	248	5%
0	Legal Proceedings	1,940	1,346	0	0%
District Delivery Service					
0	Safeguarding Hunts and Fenland	4,646	3,171	0	0%
0	Safeguarding East & South Cambs and Cambridge	4,489	2,602	0	0%
0	Early Help District Delivery Service –North	4,801	3,242	0	0%
0	Early Help District Delivery Service – South	4,736	3,439	0	0%
1,510	Children & Safeguarding Directorate Total	52,066	35,184	1,547	3%

Forecast Outturn Variance (Oct) £'000	Service		Budget 2018/19  £'000	Actual Nov 2018  £'000	Forecast Outturn Variance  £'000   %	
Education Directorate						
-359	11	Strategic Management - Education	3,563	735	-359	-10%
-67		Early Years' Service	1,442	776	-57	-4%
11		Schools Curriculum Service	62	13	11	18%
77		Schools Intervention Service	1,095	663	85	8%
176	12	Schools Partnership Service	776	728	176	23%
39		Children's' Innovation & Development Service	214	93	39	18%
-30		Teachers' Pensions & Redundancy	2,910	1,023	-30	-1%
SEND Specialist Services (0-25 years)						
1,051	13	SEND Specialist Services	8,077	6,680	1,051	13%
1,953	14	Funding for Special Schools and Units	16,889	13,406	1,953	12%
0		Children's Disability Service	6,542	5,107	0	0%
3,500	15	High Needs Top Up Funding	13,599	11,262	3,500	26%
518	16	Special Educational Needs Placements	9,973	12,742	518	5%
53		Early Years Specialist Support	381	522	95	25%
291	17	Out of School Tuition	1,519	1,798	291	19%
Infrastructure						
-90		0-19 Organisation & Planning	3,692	3,131	-90	-2%
0		Early Years Policy, Funding & Operations	92	27	0	0%
0		Education Capital	168	-33,064	0	0%
200	18	Home to School/College Transport – Mainstream	8,742	5,238	200	2%
7,323	Education Directorate Total		79,736	30,885	7,383	9%
Executive Director						
504	19	Executive Director	833	509	504	61%
-3,663	20	Central Financing	3,504	38	-3,663	-105%
-3,159	Executive Director Total		4,336	547	-3,159	-73%
10,596	Total		341,165	202,921	10,988	3%
Grant Funding						
-6,565	21	Financing DSG	-58,250	-38,833	-6,607	-11%
0		Non Baselined Grants	-39,664	-27,794	0	0%
-6,565	Grant Funding Total		-97,914	-66,627	-6,607	7%
4,031	Net Total		243,251	136,294	4,382	2%

## APPENDIX 2 – Commentary on Forecast Outturn Position

Narrative is given below where there is an adverse/positive variance greater than 2% of annual budget or £100,000 whichever is greater.

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>1) Strategic Management – Adults</b>	<b>7,578</b>	<b>-6,762</b>	<b>-2,916</b>	<b>-38%</b>
<p>A number of mitigations have been applied to this budget line to offset care cost pressures across Adult Social Care.</p> <p>The majority of this is the application of grants from central government, specifically elements of the Improved Better Care Fund and Adult Social Care Support grants, which are given for the purpose of meeting demand pressures on the social care system and to put in place measures to mitigate that demand. Parts of this funding is earmarked against pressures from increasing complexity of people that we support and increasing cost of care packages, and additional funding can be applied where some other planned spend does not happen. Spending plans for these grants, and variations to them, are agreed through either the Health and Wellbeing Board or General Purposes Committee.</p>				
<b>2) Carers</b>	<b>661</b>	<b>276</b>	<b>-200</b>	<b>-30%</b>
<p>The Carers service is expected to be -£200k underspent at the end of the year. The under spend is due to lower levels of direct payments to carers than was expected over the first half of the year. Uptake of direct payments has continued at 2017/18 levels, reflecting continued good progress to increase direct payments compared to previous years.</p>				
<b>3) Learning Disability Partnership</b>	<b>60,803</b>	<b>40,212</b>	<b>2,557</b>	<b>4%</b>
<p>An over spend of £3,329k is forecast against the Learning Disability Partnership (LDP) at the end of November 18. According to the risk sharing arrangements for the LDP pooled budget, the proportion of the over spend that is attributable to the council is <b>£2,557k</b>, an increase of £243k from October.</p> <p>Total new savings / additional income expectation of £5,329k are budgeted for 18/19. As at the end of November, a £1,352k shortfall is expected as a result of slippage of planned work and a lower level of delivery per case than anticipated. This is primarily against the reassessment saving proposal and from the conversion of residential to supported living care packages.</p> <p>Demand pressures have been higher than expected, exceeding demand funding allocations despite positive work that has reduced the overall number of people in high-cost out-of-area in-patient placements. New package costs continued to be high in 17/18 due to increased needs identified at reassessment that we had a statutory duty to meet. This, together with a shortfall in delivery of 17/18 savings, has led to a permanent opening pressure in the 18/19 budget above that level expected during business planning, reflected in the overall forecast at the end of November. £146k of the additional over spend reported in November is the result of a backdated payment to a provider, which was not previously committed.</p> <p>Where there are opportunities to achieve additional savings that can offset any shortfall from the delivery of existing planned savings these are being pursued. For example, work is ongoing to maximise referrals to the in-house Assistive Technology team as appropriate, in order to increase the number of 'Just Checking' kits that can be issued to help us to identify the most appropriate level of resource for services users at night. £103k of savings are expected to be delivered by reviewing resource allocation as informed by this technology and this additional saving has been reflected in the forecast. Also, negotiations are continuing with CCGs outside of Cambridgeshire, where people are placed out of area and the CCG in that area should be contributing to the cost of meeting health needs.</p>				

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>4) Older Peoples and Physical Disabilities Services</b>	<b>68,597</b>	<b>47,575</b>	<b>922</b>	<b>1%</b>
<p>An overspend of £922k is forecast for Older People and Physical Disability Services, and increase of £544k since October.</p> <p>The total savings expectation in this service for 2018/19 is £2.1m, and this is expected to be delivered in full through a programme of work designed to reduce demand, for example through a reablement expansion and review of double-handed care packages, and ensure funding is maximised. This has been bolstered by the fast-forward work in the Adults Positive Challenge Programme.</p> <p>The cost of providing care, however, is generally increasing in 2018/19. The unit costs of most types of care are increasing month-on-month, and the number of people with more complex needs requiring more expensive types of care are also going up. The focus on discharging people from hospitals as quickly as possible to alleviate pressure on the broader health and social care system can result in more expensive care for people, at least in the shorter-term, and can result in the Council funding care placements that were appropriate for higher levels of need at point of discharge through the accelerated discharge process. These problems are exacerbated by constraints in the local market for domiciliary care, where care packages in parts of the county cannot in all cases be immediately found. This month an estimate has been made of the pressure that will be seen by year end as a result of the upwards trend in price and service user numbers, particularly in residential and nursing care.</p> <p>In addition to the work embodied in the Adults Positive Challenge Programme to intervene at an earlier stage so the need for care is reduced or avoided, work is ongoing within the Council to bolster the domiciliary care market, and the broader care market in general:</p> <ul style="list-style-type: none"> <li>• The Council's new integrated brokerage team brings together two Councils and the NHS to source care packages</li> <li>• Providers at risk of failure are provided with some intensive support to maximise the continuity of care that they provide</li> <li>• The Reablement service has been greatly expanded and has a role as a provider of last resort for care in people's homes</li> <li>• Recent money announced for councils in the budget to support winter pressures will be used to purchase additional block capacity with domiciliary care and care home providers – this should expand capacity in the market by giving greater certainty of income to providers.</li> </ul> <p>An additional pressure of around £83k is projected on the Technology Enabled Care (TEC) budget as a result of more specialist equipment being bought. This is due to more referrals being put through the TEC Team, which is a positive as it should result in lower costs for those people's care and it will be explored whether additional funding is required for this team in future as it forms a key part of preventative work in coming years.</p>				
<b>5) Central Commissioning – Adults</b>	<b>5,635</b>	<b>15,722</b>	<b>333</b>	<b>6%</b>
<p>An overspend of £333 is forecast for Central Commissioning – Adults, due to the slower than expected delivery of a major piece of work to transform the Council's Housing Related Support contracts. It is still expected that this piece of work will be completed and deliver in full, but that this will be phased over a longer time-period due to the large number of contracts and the amount of redesigning of services that will be needed rather than simply re-negotiating contract costs. This is partially offset by savings made through recommissioning other contracts, particularly the rationalisation of block domiciliary care car rounds from the start of 18/19, and mitigations will need to be found until the delivery of the above saving is achieved in full.</p>				
<b>6) Looked After Children Placements</b>	<b>19,813</b>	<b>13,835</b>	<b>3,000</b>	<b>15%</b>
<p>LAC Placements budget continues to forecast an overspend of £3m this month. A combination of the expected demand pressures on this budget during 18/19, over and above those forecast and budgeted</p>				

for, and the underlying pressure brought forward from 17/18, results in a forecast overspend of £3m. The latest savings forecast shows an overachievement of £0.5m against the £1.5m target. The majority of this relates to some excellent work around the review of high cost placements and negotiating cheaper prices, which has yielded great results (it should be noted that these are diminishing returns and cannot be replicated every year). Much of the additional saving is absorbing the costs associated with the continued increase in LAC numbers and assisting to maintain a steady financial projection. This position continues to be closely monitored throughout the year, with subsequent forecasts updated to reflect any change in this position.

The budgeted position in terms of the placement mix is proving testing, in particular pressures within the external fostering line showing a +94 position. Given an average c.£800 per week placement costs, this presents a c.£75k weekly pressure. The foster placement capacity both in house and externally is overwhelmed by demand both locally and nationally. The real danger going forward is that the absence of appropriate fostering provision by default, leads to children and young people's care plans needing to change to residential services provision.

Overall LAC numbers at the end of November 2018, including placements with in-house foster carers, residential homes and kinship, were 764, 8 more than at the end of October. This includes 86 unaccompanied asylum seeking children (UASC). External placement numbers (excluding UASC but including 16+ and supported accommodation) at the end of November were 377, 1 less than at the end of October.

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%

**Looked After Children Placements continued**

External Placements Client Group	Budgeted Packages	31 Oct 2018 Packages	30 Nov 2018 Packages	Variance from Budget
Residential Disability – Children	1	2	2	+1
Child Homes – Secure Accommodation	0	0	0	0
Child Homes – Educational	16	18	19	+3
Child Homes – General	39	33	34	-5
Independent Fostering	199	297	293	+94
Supported Accommodation	31	23	24	-7
Supported Living 16+	8	5	5	-3
<b>TOTAL</b>	<b>294</b>	<b>378</b>	<b>377</b>	<b>+83</b>

'Budgeted Packages' are the expected number of placements by Mar-19, once the work associated to the saving proposals has been undertaken and has made an impact.

Mitigating factors to limit the final overspend position include:

- Reconstitution of panels to ensure greater scrutiny and supportive challenge.
- Monthly commissioning intentions (sufficiency strategy work-streams), budget and savings reconciliation meetings attended by senior managers accountable for each area of spend/practice. Enabling directed focus on emerging trends and appropriate responses, ensuring that each of the commissioning intentions are delivering as per work-stream and associated accountable officer. Production of datasets to support financial forecasting (in-house provider services and Access to Resources).
- Investment in children's social care commissioning to support the development of robust commissioning pseudo-dynamic purchasing systems for external spend (*to be approved*). These commissioning models coupled with resource investment will enable more transparent competition amongst providers bidding for individual care packages, and therefore support the best value offer through competition driving down costs.
- Provider meetings scheduled through the Children's Placement Service (Access to Resources) to support the negotiation of packages at or post placement. Working with the Contracts Manager to ensure all placements are funded at the appropriate levels of need and cost.
- Regular Permanence Tracking meetings (per locality attended by Access to Resources) chaired by the Independent Reviewing Service Manager to ensure no drift in care planning decisions, and support the identification of foster carers suitable for SGO/permanence arrangements. These meetings will also consider children in externally funded placements, ensuring that the authority is maximizing opportunities for discounts (length of stay/siblings), volume and recognising potential lower cost options in line with each child's care plan.
- Additional investment in the recruitment and retention of the in-house fostering service to increase the number of fostering households over a three year period.
- Recalculation of the Unaccompanied Asylum Seeking Children (UASC) Transfer Scheme allotment (0.07% of the 0-18 year old population to 0.06% - the aim that this will create greater capacity within the local market in the long term).
- Access to the Staying Close, Staying Connected Department for Education (DfE) initiative being piloted by a local charity offering 16-18 year old LAC the opportunity to step-down from residential provision, to supported community based provision in what will transfer to their own tenancy post 18.
- Greater focus on those LAC for whom permanency or rehabilitation home is the plan, to ensure timely care episodes and managed exits from care.

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>7) Home to School Transport – Special</b>	<b>7,871</b>	<b>4,053</b>	<b>1,500</b>	<b>19%</b>
<p>Home to School Transport – Special is reporting an anticipated £1.5m overspend for 2018/19. This is largely due to a 20% increase in pupils attending special schools between September 2017 and September 2018 and a 13% increase in pupils with Education Health Care Plans (EHCPs) over the same period, linked to an increase in complexity of need. This has meant that more individual transport with a passenger assistant to support the child/young person is needed. Further, there is now a statutory obligation to provide post-19 transport putting further pressure on the budget.</p> <p>The forecast has increased by £750k since last month. This is due to greater clarity around commitment now that the majority of routes for the 2018/19 academic year have been agreed, as well as the sheer growth in SEND pupil numbers for the new academic year.</p> <p>Actions being taken to mitigate the position include</p> <ul style="list-style-type: none"> <li>• A review of processes in the Social Education Transport and SEND teams with a view to reducing costs</li> <li>• A strengthened governance system around requests for costly exceptional transport requests</li> <li>• A change to the process around Personal Transport Budgets to ensure they are offered only when they are the most cost-effective option alongside the promotion of the availability of this option with parents/carers to increase take-up</li> <li>• Implementation of an Independent Travel Training programme to allow more students to travel to school and college independently.</li> </ul> <p>Some of these actions will not result in an immediate reduction in expenditure, but will help to reduce costs over the medium term.</p>				
<b>8) LAC Transport</b>	<b>1,632</b>	<b>947</b>	<b>300</b>	<b>18%</b>
<p>LAC Transport is reporting an anticipated £300k overspend for 2018/19. The overall increase in Looked after Children has meant that more children are requiring Home to School Transport. Many of these children are placed out of county and/or at a significant distance away from their schools leading to high transport costs.</p> <p>Actions being undertaken to address these pressures:</p> <ul style="list-style-type: none"> <li>• Case-by-case reviews of the most expensive transport arrangements for Looked After Children, particularly targeting reductions in high-cost single occupancy taxi journeys and encouraging more children to walk shorter journeys.</li> <li>• Route reviews to identify opportunities for shared vehicles, routes and providers, including across different client groups e.g. mainstream, SEND, or Adult transport, reducing any duplication and opportunities for better use of volunteer drivers.</li> <li>• Further activity to ensure the Council's policies around transport provision are implemented fully across the board, with joined-up decisions across social care and transport.</li> <li>• Additional capacity has been secured through the Transformation programme to provide the necessary dedicated focus for this work.</li> </ul>				
<b>9) Children in Care</b>	<b>14,807</b>	<b>11,297</b>	<b>1,224</b>	<b>8%</b>
<p>The Children in Care budget is forecasting a £1.224m over spend. This is a reduction of £38k since October.</p> <p>The UASC U18 budget is currently forecasting a £300k overspend</p> <p>There has been a significant increase in numbers of unaccompanied children and young people over the last 10 weeks (26 spontaneous arrivals in Cambridgeshire and 2 via the National Transfer Scheme). As of the 29 October 2018 there were 87 under 18 year old UASC (82 end Sept 2018). Support is available via an estimated £2.5m Home Office grant but this does not fully cover the expenditure.</p>				



Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>Children in Care continued</b> <p>Semi-independent accommodation for this age range has traditionally been possible to almost manage within the grant costs but the majority of the recent arrivals have been placed in high cost placements due to the unavailability of lower cost accommodation.</p> <p>The UASC Leaving Care budget is forecasting a £426k overspend. Support is available via an estimated £525k Home Office grant but this does not fully cover the expenditure. We are currently supporting 103 UASC care leavers of which 32 young people have been awaiting a decision from the Home Office on their asylum status for between 1 and three years. The £536k overspend is partially offset by £50k from the migration fund and £60k from the 14-25 team budget.</p> <p><u>Actions being taken:</u> The team proactively support care leavers in claiming their benefit entitlements and other required documentation and continue to review all high cost placements in conjunction with commissioning colleagues but are restricted by the amount of lower cost accommodation available.</p> <p>The Staying Put budget is currently forecasting a £223k overspend. This is a reduction of £38k since the end of October.</p> <p>The overspend is a result of the increasing number of staying put arrangements agreed for Cambridgeshire children placed in external placements, the cost of which is not covered by the DFE grant. We currently support 13 in-house placements and 13 independent placements and the DCLG grant of £171k does not cover the full cost of the placements. Staying put arrangements are beneficial for young people, because they are able to remain with their former foster carers while they continue to transition into adulthood. Outcomes are much better as young people remain in the nurturing family home within which they have grown up and only leave they are more mature and better prepared to do so.</p> <p><u>Actions being taken:</u> The fostering service will be undertaking a systematic review of all staying put costs for young people in external placements to ensure that financial packages of support are needs led and compliant with CCC policy.</p> <p>The Supervised Contact budget is forecasting an over spend of £275k.</p> <p>This is due to the use of additional relief staff and external agencies required to cover the current 227 (end Nov 2018) Supervised Contact Cases (225 end Sept) which equate to 658 (556 end Oct) supervised contact sessions a month. 339 (337 end Oct) children are currently open to the service.</p> <p><u>Actions being taken:</u> An exercise is underway reviewing the structure of Children's Services. This will focus on creating capacity to meet additional demand.</p>				
<b>10) Adoption</b>	<b>5,282</b>	<b>3,972</b>	<b>248</b>	<b>5%</b>
<p>The Adoption Allowances budget is forecasting a £248k over spend.</p> <p>In 2018/19 we are forecasting additional demand on our need for adoptive placements. We have re-negotiated our contract with Coram Cambridgeshire Adoption (CCA) based on an equal share of the extra costs needed to cover those additional placements. The increase in Adoption placements is a reflection of the good practice in making permanency plans for children outside of the looked after system and results in reduced costs in the placement budgets.</p>				

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>11) Strategic Management – Education</b>	<b>3,563</b>	<b>735</b>	<b>-359</b>	<b>-10%</b>
<p>Mitigations of 359k have been found across the Education Directorate. £273k of this is due to a review of ongoing commitments and using one-off sources of funding to offset pressures emerging across the directorate.</p> <p>The remaining £85k is an over-recovery on vacancy savings due to holding recruitment on a number of vacant management posts while a review of the overall Education structure is undertaken in conjunction with Peterborough.</p>				
<b>12) Schools Partnership Service</b>	<b>776</b>	<b>728</b>	<b>176</b>	<b>23%</b>
<p>Schools Forum took the decision to discontinue the de-delegation for the Cambridgeshire Race Equality &amp; Diversity Service (CREDS) from 1<sup>st</sup> April 2018, resulting in service closure. The closure timescales have led to a period of time where the service is running without any direct funding and a resulting pressure of £176k. This will be a pressure in 2018/19 only, and mitigating underspends elsewhere in the Education directorate will be sought.</p>				
<b>13) SEND Specialist Services</b>	<b>50,056</b>	<b>45,890</b>	<b>7,313</b>	<b>15%</b>
<p><b><u>SEND Specialist Services (0-25 year)</u></b></p> <p>The SEND service is forecasting a £7.4m overspend in 2018/19. £6.6m of this pressure is Dedicated Schools Grant expenditure which will be managed within the overall DSG resources and carried forward as a deficit balance into 2019/20. £800k of this is a base budget pressure on the Council's bottom line. We saw a net increase of 500 Education, Health and Care Plans (EHCPs) over the course of the 2017/18 academic year (13%) and have been averaging an additional 9 EHCPs a week during September and October 2018. This increase in numbers, as well as an increase in complexity of need, has caused pressures across all elements of the SEN budget:</p> <p><b>High Needs Top Up Funding - £3.5m DSG overspend</b></p> <p>As well as the overall increases in EHCP numbers creating a pressure on the Top-Up budget, the number of young people with EHCPs in Post-16 Further Education is continuing to increase significantly as a result of the provisions laid out in the 2014 Children and Families Act. This element of provision is causing the majority of the forecast overspend on the High Needs Top-Up budget.</p> <p><b>Funding to Special Schools and Units - £2m DSG overspend</b></p> <p>As the number of children and young people with an EHCP increase, along with the complexity of need, we see additional demand for places at Special Schools and High Needs Units. The extent of this is such that a significant number of spot places have been agreed and the majority of our Special Schools are now full.</p> <p><b>SEN Placements - £0.5m DSG overspend</b></p> <p>The SEN Placements budget continues to forecast an overspend of £0.5m at the end of November. This is due to a combination of factors, including:</p> <ul style="list-style-type: none"> <li>• Placement of one young person in out of county school needing residential provision, where there is appropriate educational provision to meet needs.</li> <li>• Placement of a young person in out of county provision as outcome of SENDIST appeal.</li> <li>• We are currently experiencing an unprecedented increase in requests for specialist SEMH (social, emotional and mental health) provision. Our local provision is now full, which is adding an additional demand to the high needs block.</li> </ul> <p>The first of these pressures highlights the problem that the Local Authority faces in accessing appropriate residential provision for some children and young people with SEN. Overall there are rising numbers of children and young people who are LAC, have an EHCP and have been placed in a 52 week placement. These are cases where the child cannot remain living at home. Where there are</p>				

concerns about the local schools meeting their educational needs, the SEN Placement budget has to fund the educational element of the 52 week residential placement; often these are residential schools given the level of learning disability of the young children, which are generally more expensive.

In addition, there are six young people not able to be placed in county due to lack of places in SEMH provision. Some of these young people will receive out of school tuition package whilst waiting for a suitable mainstream school placement, with support. Others have needs that will not be able to be met by mainstream school, and if no specialist places are available in county, their needs will have to be met by independent/out county placements.

### **Out of School Tuition - £0.3m DSG overspend**

The overspend is due to a combination of a higher number of children remaining on their existing packages and a higher number of children accessing new packages, due to a breakdown of placement, than the budget can accommodate.

There has been an increase in the number of children with an Education Health and Care Plan (EHCP) who are awaiting a permanent school placement, with many of those placements unable to commence until September 2018.

Several key themes have emerged throughout the last year, which have had an impact on the need for children to receive a package of education, sometimes for prolonged periods of time:

- Casework officers were not always made aware that a child's placement was at risk of breakdown until emergency annual review was called.
- Casework officers did not have sufficient access to SEND District Team staff to prevent the breakdown of an education placement in the same way as in place for children without an EHCP.
- There were insufficient specialist placements for children whose needs could not be met in mainstream school.
- There was often a prolonged period of time where a new school was being sought, but where schools put forward a case to refuse admission.
- In some cases of extended periods of tuition, parental preference was for tuition rather than in-school admission.

It has also emerged that casework officers do not currently have sufficient capacity to fulfil enough of a lead professional role which seeks to support children to return to mainstream or specialist settings.

### **SEND Specialist Services - £1.05m overspend, £0.25m DSG £0.8m base budget**

SEND Specialist Services is reporting a £1.2m pressure. This is made up of

- Educational Psychologists – Educational Psychologists have a statutory role in signing off EHCPs. Increasing demand for EHCPs, along with recruitment issues meaning that costly locum staff are being used, creating a pressure on the budget.
- Access & Inclusion – there has been an increase in the number pupils without EHCPs being excluded leading to Out of School tuition being required. This has led to a pressure on the Access & Inclusion budget.
- Under-recovery on income generation – increased demand across the service has reduced the capacity of staff to leading to an under-recovery on income generation.

### **Mitigating Actions:**

In order to mitigate these pressures the following actions are being taken:

- A focus on financial control including a detailed analysis of high cost expenditure to assess whether the current level support is required and, if so, whether the support could be provided in a more cost-effective manner
- An overall review of SEND need across Cambridgeshire, the available provision, and the likely need in future years. This work will inform decision around the development of new provision to ensure that more need can be met in an appropriate manner in county, reducing the number of children and young people who are placed in high-cost, independent or Out of County provision. This will include working with FE providers to ensure appropriate post-16 provision is available.
- Proposal to create an in-house "bank" of teachers, tutors, teaching assistants or specialist practitioners and care workers in order to achieve a cost of providing out of school tuition

Service	Budget 2018/19	Actual	Forecast Outturn Variance	
	£'000	£'000	£'000	%
<b>SEND Specialist Services continued</b> <ul style="list-style-type: none"> <li>Move to a dynamic-purchasing system for SEN Placements and Out of School Tuition to provide a wider, more competitive market place, reducing unit costs</li> <li>Enhance the preventative work of the Statutory Assessment Team by expanding the SEND District Team, so that support can be deployed for children with an EHCP, where currently the offer is minimal and more difficult to access;</li> <li>Creation of an outreach team from the Pilgrim PRU to aid quicker transition from tuition or inpatient care, back into school; and</li> <li>Review of existing tuition packages to gain a deeper understanding of why pupils are on tuition packages and how they can be moved back into formal education.</li> <li>A review of the Educational Psychologist offer, including a focus on recruiting permanent staff to mitigate the high locum costs.</li> </ul>				
<b>14) Home to School / College Transport – Mainstream</b>	<b>8,742</b>	<b>5,238</b>	<b>200</b>	<b>2%</b>
<p>Home to School Transport – Mainstream is reporting an anticipated £200k overspend for 2018/19. While savings were achieved as part of the annual tender process we have seen significantly higher costs being quoted for routes in some areas of the county than in previous years, which has challenged both our ability to make savings, as well as increasing the cost of any routes which need to be tendered during the course of the year. Where routes are procured at particularly high rates these are agreed on a short-term basis only with a view to reviewing and retendering at a later date in order to reduce spend where possible.</p> <p>There have also been pressures due to a higher than usual number of in-year admissions requests where the local school is full. These situations require us to provide transport to schools further away, outside statutory walking distance. The effect on the Transport budget is taken into account when pupils are placed in-year which is resulting in a smaller pressure on the budget than would otherwise be the case.</p>				
<b>15) Executive Director</b>	<b>833</b>	<b>509</b>	<b>504</b>	<b>61%</b>
<p>The Executive Director Budget is currently forecasting an overspend of £504k. This is mainly due to costs of the Mosaic project that were previously capitalised being moved to revenue.</p> <p>Changes in Children's Services, agreed at the Children's and Young People's committee, have led to a change in approach for the IT system for Children's Services. At its meeting on 29th May General Purposes Committee supported a recommendation to procure a new Children's IT System that could be aligned with Peterborough City Council. A consequence of this decision is that the Mosaic system will no longer be rolled out for Children's Services. Therefore £504k of costs for Mosaic, which were formerly charged to capital, will be a revenue pressure in 2018/19.</p>				
<b>16) Central Financing</b>	<b>3,504</b>	<b>38</b>	<b>-3,663</b>	<b>-105%</b>
<p>The underspend within the Central Financing policy line reflects the allocation of the £3.413m smoothing fund reserve to support Children's Services pressures, as recommended by CYP Committee and approved by General Purposes Committee. In addition, unused accruals within A&amp;S have contributed a further £250k to the underspend.</p>				
<b>17) Financing DSG</b>	<b>-58,250</b>	<b>-38,833</b>	<b>-6,607</b>	<b>-11%</b>
<p>Within P&amp;C, spend of £58.3m is funded by the ring fenced Dedicated Schools Grant. A contribution of £6.61m has been applied to fund pressures on a number of High Needs budgets including High Needs Top Up Funding (£3.50m), Funding to Special Schools and Units (£1.95m), SEN Placements (£0.52m), Out of School Tuition (£0.29m), SEND Specialist Services (£0.25m) and Early Years Specialist Support (£0.10m). For this financial year the intention is to manage within overall available DSG resources.</p>				

### APPENDIX 3 – Grant Income Analysis

The table below outlines the additional grant income, which is not built into base budgets.

Grant	Awarding Body	Expected Amount £'000
<b>Grants as per Business Plan</b>		
Public Health	Department of Health	293
Better Care Fund	Cambs & P'Boro CCG	26,075
Social Care in Prisons Grant	DCLG	318
Unaccompanied Asylum Seekers	Home Office	2,994
Staying Put	DfE	171
Youth Offending Good Practice Grant	Youth Justice Board	531
Crime and Disorder Reduction Grant	Police & Crime Commissioner	127
Troubled Families	DCLG	2,031
Children's Social Care Innovation Grant (MST innovation grant)	DfE	313
Opportunity Area	DfE	3,400
Opportunity Area - Essential Life Skills	DfE	978
Adult Skills Grant	Skills Funding Agency	2,123
AL&S National Careers Service Grant	European Social Fund	164
Non-material grants (+/- £160k)	Various	148
<b>Total Non Baselined Grants 2018/19</b>		<b>39,664</b>

Financing DSG	Education Funding Agency	58,250
<b>Total Grant Funding 2018/19</b>		<b>97,914</b>

The non-baselined grants are spread across the P&C directorates as follows:

Directorate	Grant Total £'000
Adults & Safeguarding	26,513
Children & Safeguarding	5,678
Education	3,422
Community & Safety	4,050
<b>TOTAL</b>	<b>39,664</b>

## APPENDIX 4 – Virements and Budget Reconciliation

### Virements between P&C and other service blocks:

	Eff. Period	£'000	Notes
<b>Budget as per Business Plan</b>		<b>239,124</b>	
Strategic Management – Education	Apr	134	Transfer of Traded Services ICT SLA budget to Director of Education from C&I
Childrens' Innovation & Development Service	Apr	71	Transfer of Traded Services Management costs/recharges from C&I
Strategic Management – Adults	June	-70	Transfer Savings to Organisational Structure Review, Corporate Services
Strategic Management – C&S	June	295	Funding from General Reserves for Children's services reduced grant income expectation as approved by GPC
Children in Care	June	390	Funding from General Reserves for New Duties – Leaving Care as approved by GPC
Strengthening Communities	Aug	2	Transfer of Community Resilience Development Team from Planning & Economy
Strategic Management – Commissioning	Sept	-95	Transfer of Advocacy budget to Corporate
Central Financing	Sept	3,413	Financing Items, Use of Smoothing Fund Reserve as per GPC
Children's Centres Strategy	Oct	-12	Transfer of Bookstart contribution to Planning & Economy
<b>Budget 2018/19</b>		<b>243,251</b>	

# APPENDIX 5 – Reserve Schedule as at November 2018

Fund Description	Balance at 1 April 2018	2018/19		Year End Forecast 2018/19	Notes
		Movements in 2018/19	Balance at November 2018		
	£'000	£'000	£'000	£'000	
<b><u>General Reserve</u></b>					
P&C carry-forward	0	0	0	-4,382	Overspend £4,382k applied against General Fund.
<b>subtotal</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>-4,382</b>	
<b><u>Equipment Reserves</u></b>					
IT for Looked After Children	64	0	64	0	Replacement reserve for IT for Looked After Children (Final year remaining at current rate of spend).
<b>subtotal</b>	<b>64</b>	<b>0</b>	<b>64</b>	<b>0</b>	
<b><u>Other Earmarked Reserves</u></b>					
<b>Adults &amp; Safeguarding</b>					
Hunts Mental Health	200	0	200	200	Provision made in respect of a dispute with another County Council regarding a high cost, backdated package
<b>Commissioning</b>					
Mindful / Resilient Together	55	0	55	0	Programme of community mental health resilience work (spend over 3 years)
Home to School Transport Equalisation reserve	116	0	116	0	Equalisation reserve to adjust for the varying number of school days in different financial years
Disabled Facilities	38	0	38	0	Funding for grants for disabled children for adaptations to family homes.
<b>Community &amp; Safety</b>					
Youth Offending Team (YOT) Remand (Equalisation Reserve)	60	0	60	10	Equalisation reserve for remand costs for young people in custody in Youth Offending Institutions and other secure accommodation.
<b>Education</b>					
Cambridgeshire Culture/Art Collection	153	0	153	139	Providing cultural experiences for children and young people in Cambs
<b>Cross Service</b>					
Other Reserves (<£50k)	42	-38	4	0	Other small scale reserves.
<b>subtotal</b>	<b>664</b>	<b>-38</b>	<b>626</b>	<b>349</b>	
<b>TOTAL REVENUE RESERVE</b>	<b>728</b>	<b>-38</b>	<b>690</b>	<b>-4,033</b>	

Fund Description	Balance at 1 April 2018	2018/19		Year End Forecast 2018/19	Notes
		Movements in 2018/19	Balance at Close 18/19		
	£'000	£'000	£'000	£'000	
<b><u>Capital Reserves</u></b>					
Devolved Formula Capital	717	0	717	0	Devolved Formula Capital Grant is a three year rolling program managed by Cambridgeshire Schools.
Basic Need	0	14,351	14,351	0	The Basic Need allocation received in 2018/19 is fully committed against the approved capital plan. Remaining balance is 2019/20 & 2020/2021 funding in advance
Capital Maintenance	0	934	934	0	The School Condition allocation received in 2018/19 is fully committed against the approved capital plan.
Other Children Capital Reserves	5	833	838	0	£5k Universal Infant Free School Meal Grant c/fwd.
Other Adult Capital Reserves	56	4,141	4,197	0	Adult Social Care Grant to fund 2018/19 capital programme spend.
<b>TOTAL CAPITAL RESERVE</b>	<b>779</b>	<b>20,258</b>	<b>21,036</b>	<b>0</b>	

(+) positive figures represent surplus funds.

(-) negative figures represent deficit funds.



## APPENDIX 6 – Capital Expenditure and Funding

### 6.1 Capital Expenditure

2018/19					TOTAL SCHEME	
Original 2018/19 Budget as per BP £'000	Scheme	Revised Budget for 2018/19 £'000	Actual Spend (Nov 18) £'000	Forecast Outturn (Nov 18) £'000	Total Scheme Revised Budget £'000	Total Scheme Forecast Variance £'000
	<b>Schools</b>					
44,866	Basic Need – Primary	34,189	21,422	33,199	309,849	7,278
35,502	Basic Need - Secondary	36,939	14,375	29,315	274,319	0
1,222	Basic Need - Early Years	1,488	2	1,488	6,126	0
2,400	Adaptations	2,381	1,791	2,560	7,329	0
3,476	Specialist Provision	486	-8	516	26,631	6,870
2,500	Condition & Maintenance	2,500	4,981	2,500	9,927	-123
1,005	Schools Managed Capital	1,599	15	1,599	25,500	0
100	Site Acquisition and Development	100	636	100	200	0
1,500	Temporary Accommodation	1,500	877	1,500	13,000	0
295	Children Support Services	370	6	415	2,850	75
5,565	Adult Social Care	5,565	5,491	5,565	43,241	0
-12,120	Capital Variation	-10,469	0	-2,109	-58,337	1,651
1,509	Capitalised Interest	1,509	0	1,509	8,798	0
<b>87,820</b>	<b>Total P&amp;C Capital Spending</b>	<b>78,157</b>	<b>49,587</b>	<b>78,157</b>	<b>669,433</b>	<b>15,751</b>

#### Basic Need - Primary £7,278k increase in scheme cost

A total scheme variance of £7,278k has occurred due to changes since the Business Plan was approved in response to adjustments to development timescales and updated school capacity information. The following schemes require the cost increases to be approved by GPC for 2018/19;

- St Ives, Eastfield / Westfield / Wheatfields; £7,000k overall scheme increase of which £300k will materialise in 2018/19. The scope of the project has changed to amalgamate Eastfield infant & Westfield junior school into a new all through primary.
- St Neots, Wintringham Park; £5,150k increase in total scheme cost. £3,283k will materialise in 2018/19. Increased scope to build a 3FE Primary and associated Early Years, Offset by the deletion of the St Neots Eastern Expansion scheme.
- Wing Development; £400k additional costs in 2018/19. New school required as a result of new development. Total scheme cost £10,200k, it is anticipated this scheme will be funded by both the EFA as an approved free school and S106 funding.
- Bassingbourn Primary School; £3,150k new scheme to increase capacity to fulfil demand required from returned armed forces families. £70k expected spend in 2018/19.

The following scheme has reduced in cost since business plan approval.

- St Neots – Eastern expansion; £4,829k reduction. Only requirement is spend on a temporary solution at Roundhouse Primary. Wintringham Park scheme will be progressed to provide places.

#### Basic Need - Primary £990k slippage

The following Basic Need Primary schemes have experienced slippage in 2018/19 as follows;

- Waterbeach Primary scheme has experienced slippage of £631k due to start on site now being January 2019, a one month delay. The contract length has also increase from 13 to 15 months.

- North West Cambridge (NIAB) scheme has incurred accelerated spend of £100k to undertake initial ground works within the planning permission timescales.
- Wyton Primary has experienced £149k slippage due to slighter slower progress than originally expected.
- St Neots – Eastern expansion has experienced £35k slippage as a proportion of costs will not due until 2019/20 financial year.
- Ermine Street Primary has experienced £140k slippage due to revised phasing of the scheme.
- Littleport 3<sup>rd</sup> Primary has experienced £180k slippage as the scheme is now not required until September 2021.
- Sawtry Infant School £230k and Sawtry Junior school £40k due to the revised start on site dates of 18<sup>th</sup> March 2019 with completion to remain at September 2020.
- Chatteris Primary School has incurred slippage of £150k due to the delay in the start of works, this will have no impact on the completion date of summer 2020.

The slippage above has been offset by accelerated expenditure incurred on Meldreth, Fulbourn, Sawtry Infants and Bassingbourn where progress is ahead of originally plan.

Isle Primary, Ely has experienced £432k overspend on the total project budget due to additional cost of soil removal. This cost was approved by corporate property colleagues, but was not budgeted within the original scope of works.

### **Basic Need - Secondary £7,624k slippage**

The following Basic Need Secondary schemes have experienced slippage in 2018/19 as follows;

- Northstowe Secondary & Special has experienced £5,700k slippage in 2018/19 due to a requirement for piling foundations on the site, which will lead to an increase in scheme cost and also extend the build time, also enabling works are only being completed for the SEN provision and part of the Secondary school in 2018/19, this is not what was initialled planned.
- Alconbury Weald Secondary & Special has to date forecasting £200k slippage as currently there is no agreed site for the construction. Scheme expected to be delivered for September 2022.
- Cambourne Village College is not starting on site until February 2019 for a September 2019 completion the impact being £1,599k slippage.
- North West Fringe School; £300k slipped as the scheme has not yet progressed.
- Cromwell Community College has experienced £100k slippage in October 2018 as early highways works to the site have been delayed to form a bigger highways element to be undertaken in summer 2019.

### **Specialist Provision £6,870k increase in scheme cost**

Highfields Special School has experienced £250k additional cost in 2018/19. New scheme to extend accommodation for the current capacity and create teaching space for extended age range to 25 total cost £6,870k

### **Adaptations £179k accelerated spend**

Morley Memorial Scheme is experiencing accelerated spend as works is progressing slightly ahead of the original planned timescales.

### **Devolved Formula Capital**

The revised budget for Devolved Formula capital has reduced by £123k due to government confirming the funding for 2018/19 allocations.

**Children's Minor Works and Adaptions £75k increased scheme costs. £45k 2018/19 overspend.**

Additional budget to undertake works to facilitate the Whittlesey Children's Centre move to Scaldgate Community Centre. There has also been further increase in the cost of the Scaldgate scheme resulting in an estimated £45k overspend in 2018/19.

**P&C Capital Variation**

The Capital Programme Board recommended that services include a variation budget to account for likely slippage in the capital programme, as it is sometimes difficult to allocate this to individual schemes in advance. As forecast underspends start to be reported, these are offset with a forecast outturn for the variation budget, leading to a balanced outturn overall up until the point where slippage exceeds this budget. The allocation for P&C's negative budget adjustments has been calculated as follows, shown against the slippage forecast to date:

2018/19					
Service	Capital Programme Variations Budget £000	Forecast Outturn Variance (Nov 18) £000	Capital Programme Variations Budget Used £000	Capital Programme Variations Budget Used %	Revised Outturn Variance (Nov 18) £000
P&C	-10,469	8,360	8,360	79.9	-2,109
<b>Total Spending</b>	<b>-10,469</b>	<b>8,360</b>	<b>8,360</b>	<b>79.9</b>	<b>-2,109</b>

**6.2 Capital Funding**

2018/19				
Original 2018/19 Funding Allocation as per BP £'000	Source of Funding	Revised Funding for 2018/19 £'000	Forecast Funding Outturn (Nov 18) £'000	Forecast Funding Variance - Outturn (Nov 18) £'000
24,919	Basic Need	24,919	24,919	0
4,043	Capital maintenance	4,202	4,202	0
1,005	Devolved Formula Capital	1,599	1,599	0
4,115	Adult specific Grants	4,171	4,171	0
5,944	S106 contributions	6,324	6,324	0
833	Other Specific Grants	833	833	0
1,982	Other Capital Contributions	1,982	1,982	0
47,733	Prudential Borrowing	36,881	36,881	0
-2,754	Prudential Borrowing (Repayable)	-2,754	-2,754	0
<b>87,820</b>	<b>Total Funding</b>	<b>78,157</b>	<b>78,157</b>	<b>0</b>

## APPENDIX 7 – Performance at end of October 2018

Outcome		Adults and children are kept safe								
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
% of adult safeguarding enquiries where outcomes were at least partially achieved	Adults & Safeguarding	73.0%	n/a	95.0%	2017/2018	↑	No target	n/a	n/a	Performance is improving as the 'Making Safeguarding Personal' agenda become imbedded in practice
% of people who use services who say that they have made them feel safer	Adults & Safeguarding	84.8%	n/a	83.2%	2017/2018	↓	No target	n/a	n/a	Performance has fallen since last year's survey, however the change is not considered statistically significant based on the survey methodology used.
Rate of referrals per 10,000 of population under 18	Children & Safeguarding	28.6	n/a	39.7	Oct	↓	No target	455.8	548.2	The referral rate increased significantly this month.
% children whose referral to social care occurred within 12 months of a previous referral	Children & Safeguarding	22.4%	20.0%	20.4%	Oct	↑	Off Target (Red)	22.3%	21.9%	Re-referrals to children's social care decreased this month but remained above target. It is below average in comparison with statistical neighbours and the England average.

Outcome		Adults and children are kept safe								
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Number of children with a Child Protection Plan per 10,000 population under 18	Children & Safeguarding	36.8	30.0	37.1	Oct	↓	Off Target (Red)	36.93	43.3	During October we saw the numbers of children with a Child Protection plan increase from 495 to 498. The introduction of an Escalation Policy for all children subject to a Child Protection Plan was introduced in June 2017. Child Protection Conference Chairs raise alerts to ensure there is clear planning for children subject to a Child Protection Plan. This has seen a decrease in the numbers of children subject to a Child Protection Plan.
Proportion of children subject to a Child Protection Plan for the second or subsequent time (within 2 years)	Children & Safeguarding	13.3%	5%	10.1%	Oct	↑	Off Target (Red)	22.5%	18.7%	In October there were 8 children subject to a child protection plan for the second or subsequent time. The rate is favourable in comparison to statistical neighbours and the England average, however it is above target this month. NOTE: Target added in July 2018.
The number of looked after children per 10,000 population under 18	Children & Safeguarding	54.9	40	56.3	Oct	↓	Off Target (Red)	44.9	62	At the end of October there were 756 children who were looked after by the Local Authority and of these 88 were unaccompanied asylum seeking children and young people. Cambridgeshire are supporting 105 care leavers who were previously assessed as being unaccompanied asylum seeking children and 32 adult asylum seekers whose claims have not reached a conclusion. These adults have been waiting between one and three years for a status decision to be made by the Home Office.  Actions being taken include: There is currently a review underway of the Threshold to Resources Panel (TARP) which is chaired by the Assistant Director for Children's Services. The panel is designed to review

Outcome	Adults and children are kept safe									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
										<p>children on the edge of care, specifically looking to prevent escalation by providing timely and effective interventions. The intention is to streamline a number of District and Countywide Panels to ensure close scrutiny of thresholds and use of resources but also to provide an opportunity for collaborative working across services to improve outcomes for children. It is proposed that the new panel structure will be in place for the implementation of the Change for Children transformation.</p> <p>A county wide Legal Tracker is in place which tracks all children subject to the Public Law Outline (pre proceedings), Care Proceedings and children accommodated by the Local Authority with parental agreement. This is having a positive impact on the care planning for Cambridgeshire's most vulnerable children, for example in the identification of wider family members in pre-proceedings where there are concerns that is not safe for reunification is considered and if this is not possible a timely plan is made for permanence via Special Guardianship Order, Adoption or Long Term Fostering. The multi-agency Unborn Baby Panel operational in the South and North of the County monitors the progress of care planning, supporting timely decision making and permanency planning.</p> <p>Monthly Placement Strategy, Finance and Looked After Children Savings Meetings are now operational and attended by representatives across Children's Social Care, Commissioning and Finance. The purpose of these meetings is to provide increased scrutiny on financial commitments for example placements for looked after children, areas of specific concern and to monitor savings targets. This meetings reports into the People and Communities Delivery Board.</p>

Outcome	Adults and children are kept safe									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
										Supporting this activity, officers in Children's Social Care and Commissioning are holding twice weekly placement forum meetings which track and scrutinise individual children's care planning and placements. These meetings, led by Heads of Service have positively impacted on a number of looked after children who have been consequently been able to move to an in house and in county foster care placement, plans have been made to de-escalate resources in a timely way or children have returned to live with their family. In Cambridgeshire we have 74% of our looked after children in foster care as opposed to 78% nationally and 42% of these children are placed with in-house carers as opposed to 58% in external placements
Number of young first time entrants into the criminal justice system, per 10,000 of population compared to statistical neighbours	Community & Safety	2.18	n/a	1.13	Q2	↑	No target			Awaiting comparator data to inform target setting

Outcome	Older people live well independently									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Number of contacts for community equipment in period	Adults & Safeguarding		n/a				No target	n/a	n/a	New measure, currently in development

Outcome	Older people live well independently									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Number of contacts for Assistive Technology in period	Adults & Safeguarding		n/a				No target	n/a	n/a	New measure, currently in development
Proportion of people finishing a reablement episode as independent (year to date)	Adults & Safeguarding	54.7%	57.0%	56.7%	Sep-18	↑	Within 10% (Amber)	n/a	n/a	The throughput volumes are close to the expected target and this measure is expected to improve across the rest of the year.
Average monthly number of bed day delays (social care attributable) per 100,000 18+ population	Adults & Safeguarding	143	114	142	Sep-18	↑	Off target (Red)	n/a	n/a	<p>In September 2018, there were 724 ASC-attributable bed-day delays recorded in Cambridgeshire. For the same period the previous year there were 849 delays – a 15% reduction. The Council is continuing to invest considerable amounts of staff and management time into improving processes, identifying clear performance targets and clarifying roles &amp; responsibilities. We continue to work in collaboration with health colleagues to ensure correct and timely discharges from hospital.</p> <p>Delays in arranging residential, nursing and domiciliary care for patients being discharged from Addenbrooke's remain the key drivers of ASC bed-day delays.</p>



Outcome		Older people live well independently								
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Number of Community Action Plans Completed in period	Adults & Safeguarding	85	n/a	366*	Oct	↑	No Target	n/a	n/a	*Data for September is only up to 21/09/2018 when transition to new social care IT system commenced. October figures represent a new business process being implemented in the new IT system and therefore is not completely comparable with previous data and may include retrospectively loaded data for CAPs completed during the transition period between legacy and new systems.
Number of assessments for long-term care completed in period	Adults & Safeguarding	99	n/a	231*	Oct	↑	No target	n/a	n/a	*Data for September is only up to 21/09/2018 when transition to new social care IT system commenced. October figures represent a new business process being implemented in the new IT system and therefore is not completely comparable with previous data and may include retrospectively loaded data for assessments completed during the transition period between legacy and new systems.

Outcome	Older people live well independently									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
BCF 2A PART 2 - Admissions to residential and nursing care homes (aged 65+), per 100,000 population	Adults & Safeguarding	164.8	282.0 (Pro-rata)	195.6	Sep*	↑	On Target (Green)	n/a	n/a	<p>The implementation of the Transforming Lives model, combined with a general lack of available residential and nursing beds in the area has continued to keep admissions below national and statistical neighbour averages.</p> <p>N.B. This is a cumulative figure, so will always go up. An upward direction of travel arrow means that if the indicator continues to increase at the same rate, the ceiling target will not be breached.</p> <p>*No new data is currently available for this measure during ongoing migration of service data to Mosaic system.</p>

Outcome	People live in a safe environment									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Victim-based crime per 1,000 of population compared to statistical neighbours (hate crime)	Community & Safety	49.90	n/a	49.54	Q1	↑	No target	55.81	69.23	New measure, in development

Outcome	People with disabilities live well independently									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Proportion of adults with a primary support reason of learning disability support in paid employment (year to date)	Adults & Safeguarding	1.4%	3.0% (Pro-rata)	1.4%	Sep*	→	Off Target (Red)	n/a	n/a	<p>Performance remains low. As well as a requirement for employment status to be recorded, unless a service user has been assessed or reviewed in the year, the information cannot be considered current. Therefore this indicator is also dependent on the review/assessment performance of LD.</p> <p>(N.B: This indicator is subject to a cumulative effect as clients are reviewed within the period.)</p> <p>*No new data is currently available for this measure during ongoing migration of service data to Mosaic system.</p>

Outcome	People with disabilities live well independently									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Proportion of adults in contact with secondary mental health services in paid employment	Adults & Safeguarding	11.9%	12.5%	12.6%	Oct	↑	On Target (Green)	n/a	n/a	Performance at this measure is below target. Reductions in the number of people in contact with services are making this indicator more variable while the numbers in employment are changing more gradually.
Proportion of adults with a primary support reason of learning disability support who live in their own home or with their family	Adults & Safeguarding	68.0%	72.0%	68.0%	Sep*	→	Within 10% (Amber)	n/a	n/a	Performance is slightly below target, but improving generally.  *No new data is currently available for this measure during ongoing migration of service data to Mosaic system.
Proportion of adults in contact with secondary mental health services living independently, with or without support	Adults & Safeguarding	81.4%	75.0%	81.4%	Oct	→	On Target (Green)	n/a	n/a	Performance is above target and improving gradually.
Proportion of adults receiving Direct Payments	Adults & Safeguarding	22.8%	24%	22.4	Oct	↓	Within 10% (Amber)	n/a	n/a	Performance is slightly below target, and continues to fall gradually.
Proportion of carers receiving Direct Payments	Adults & Safeguarding	96.4%	n/a	96.4%	Oct	→	No target	n/a	n/a	Direct payments are the default option for carers support services, as is reflected in the high performance of this measure.

Outcome	Places that work with children help them to reach their full potential									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
% of EHCP assessments completed within timescale	Children & Safeguarding	50.0%	70.0%	40.0%	Oct	↓	Off Target (Red)			Performance remains below target
Number of young people who are NEET, per 10,000 of population compared to statistical neighbours	Children & Safeguarding	289.0	n/a	305.0	Jul	↓	No target	213.8	271.1	The rate increased against the previous reporting period. The rate remains higher than statistical neighbours.
Proportion of young people with SEND who are NEET, per 10,000 of population compared to statistical neighbours	Children & Safeguarding	738.00	n/a	567	Q2	↑	No target			The figure for Q2 is lower than Q1 however it is higher than statistical neighbours (524)
KS2 Reading, writing and maths combined to the expected standard (All children)	Education	58.7%	65.0%	60.9%	2017/18	↑	Within 10% (Amber)	64.4% (2017/18)	64.4% (2017/18)	2017/18 Performance increased but remains below that of the national average. Please note the 2017/18 figures have been calculated from provisional data which means it is subject to changes in future revised releases.

Outcome	Places that work with children help them to reach their full potential									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
KS4 Attainment 8 (All children)	Education	47.7	50.1	47.9	2017/18	↑	Within 10% (Amber)	47.5	46.4	<p>The 2017/18 Attainment 8 average score by 0.2 percentage points in comparison to 2016/17. The figure for England rose by 0.1 percentage point and Cambridgeshire is currently 1.5 percentage points above the England figure.</p> <p>The 2017/18 statistical neighbour average is not yet available so the 2016/17 figure has been left in as a comparison and will be updated as soon as new data becomes available. The overall figure for our regional neighbours in the East of England is 46.8 and Cambridge is 1.1 percentage points above this at present.</p> <p>Please note the 2017/18 figures are from provisional DFE data which means it is subject to change before the final release in January 2019</p>
% of Persistent absence (All children)	Education	9.2%	8.5%	8.9%	2016/17	↑	Within 10% (Amber)	10.0%	10.8%	<p>2016/17 Persistent absence has reduced from 9.2% to 8.9% and is below both the statistical neighbour and national averages.</p>

Outcome	Places that work with children help them to reach their full potential									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
% Fixed term exclusions (All children)	Education	3.47%	3.7%	3.76%	2016/17	↓	On target (Green)	4.30%	4.76%	The % of fixed term exclusions rose by 0.5 percentage points in 2016/17 in comparison to the previous year. This is well below the statistical neighbour average and the national figure.
% receiving place at first choice school (Primary)	Education	93.2%	93.0%	94.7%	Sept-18	↑	On target (Green)	91.2%	91.0%	Performance increased by 1.5 percentage points in comparison to the previous reporting period and is above both the statistical neighbour average and the national figure.
% receiving place at first choice school (Secondary)	Education	92.5%	91.0%	87.8%	Sept-18	↓	Within 10% (Amber)	87.2%	82.1%	Performance fell by 4.7 percentage points in comparison to the previous reporting period although it remains above both the statistical neighbour average and the national figure.  The statistical neighbour average fell 1.2 percentage points and the national figure fell by 1.4 percentage points in the same period.

Outcome	Places that work with children help them to reach their full potential									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
% of 2 year olds taking up the universal entitlement (15 hours)	Education	70.6%	75.0%	66.7%	Summer term 2018	↓	Off target (Red)	73.3% (2018 academic year)	71.8% (2018 academic year)	<p>Performance decreased by just under 4 percentage points in comparison to the previous figure for the spring 2018 term. The annual figure reported by the DFE is 68% for 2018 which below both the statistical neighbour average and the England average. The previous figure for 2017 was 79%.</p> <p>The DFE estimate there were 1700 Cambridgeshire two year olds eligible for funded early education in 2018. Of those eligible there were 1140 two year olds taking up the funded early education. 95.6% of these met the economic basis for funding criteria. The remaining 4.4% of two years olds met the criteria on a high-level SEN or disability basis or the looked after or adopted from care basis.</p>
Ofsted - Pupils attending schools that are judged as Good or Outstanding (Primary Schools)	Education	81.7%	90%	81.4%	Oct-18	↓	Within 10% (Amber)	88.1%	87.3%	<p>Performance has decreased by 0.3 percentage points since last month. Both the national figure and the statistical neighbour figures have increased slightly.</p>



Outcome	Places that work with children help them to reach their full potential									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Ofsted - Pupils attending schools that are judged as Good or Outstanding (Secondary Schools)	Education	87.6%	90%	87.6%	Oct-18	➔	Within 10% (Amber)	84.3%	80.4%	Performance has remained the same since last month.  Both the national figure and the statistical neighbour figures have increased slightly.
Ofsted - Pupils attending schools that are judged as Good or Outstanding (Special Schools)	Education	87.0%	100%	87.0%	Oct-18	➔	Off target (Red)	93.9%	93.5%	Performance has remained the same since last month.  There are currently 2 schools which received an overall effectiveness grading of requiring improvement and 137 pupils attend these schools in total.  The statistical neighbour figure has also remained the same and the national figure has increased by 0.1 percentage points.
Ofsted - Pupils attending schools that are judged as Good or Outstanding (Nursery Schools)	Education	100%	100%	100%	Oct-18	➔	On target (Green)	100%	98.2%	Performance is high and has remained the same as the previous month. The national figure has decreased by 0.1 percentage point and the statistical neighbour average remain unchanged.

Outcome	The Cambridgeshire economy prospers to the benefit of all residents									
Measure	Responsible Directorate(s)	Previous period	Target	Actual	Date of latest data	Direction of travel (up is good, down is bad)	RAG Status	Stat Neighbours	England	Comments
Proportion of new apprentices per 1,000 of population, compared to national figures	Community & Safety		n/a				No target			New measure in development
Engagement with learners from deprived wards as a proportion of the total learners engaged	Community & Safety		n/a				No target			New measure in development

# ADULTS POLICY AND SERVICE COMMITTEE AGENDA PLAN

Published on 2nd January 2019



Cambridgeshire  
County Council

**Agenda Item: 10**

## **Notes**

Committee dates shown in bold are confirmed.

Committee dates shown in brackets and italics are reserve dates.

The definition of a key decision is set out in the Council's Constitution in Part 2, Article 12.

\* indicates items expected to be recommended for determination by full Council.

+ indicates items expected to be confidential, which would exclude the press and public.

Draft reports are due with the Democratic Services Officer by 10.00 a.m. eight clear working days before the meeting.

The agenda dispatch date is five clear working days before the meeting.

The following are standing agenda items which are considered at every Committee meeting:

- Minutes of previous meeting and Action Log;
- Finance and Performance Report;
- Agenda Plan, and Appointments to Outside Bodies.

Committee date	Agenda item	Lead officer	Reference if key decision	Deadline for reports	Agenda despatch date
<b>10/01/19</b>	Care Homes Development Work Stream 2 to Commission New Block Contracts	A Thorp	2019/018	21/12/18	02/01/19
	Cambridgeshire County Council Discharge and Transition Cars	J Olu / O Hayward	2019/019		
	Review and Redesign of Older People's Day Opportunities	A Thorp	Not applicable		
	Delayed Transfers of Care – Progress Report	C Black / W Patten	Not applicable		
	Adults Positive Challenge Programme Update	C Black	Not applicable		

<b>Committee date</b>	<b>Agenda item</b>	<b>Lead officer</b>	<b>Reference if key decision</b>	<b>Deadline for reports</b>	<b>Agenda despatch date</b>
<i>14/02/19 Provisional meeting</i>				<i>01/02/19</i>	<i>05/02/19</i>
<b>21/03/19</b>	Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) Work Programme Update	F Davies	Not applicable	08/03/19	12/03/19
	Better Care Fund – Deep Dive	W Patten	Not applicable		
	Peer Review Action Plan Delivery	H Gregg	Not applicable		
	Transformation Tracker	W Patten	Not applicable		
	Doddington Court – extension of extra care contract and incorporation of reablement service	L O’Brien	2019/026		
<i>14/04/19 Provisional meeting</i>				<i>01/04/19</i>	<i>05/04/19</i>
<b>16/05/19</b>	Deep Dive - TBC	C Black / W Patten	Not applicable	03/05/19	08/05/19
	Adults Positive Challenge	T Hornsby	Not applicable		
<i>13/06/19 Provisional meeting</i>				<i>31/05/19</i>	<i>05/06/19</i>
<b>04/07/19</b>	Delayed Transfers of Care (DTOC) Progress Report	C Black	Not applicable	21/06/19	26/06/19
	Risk Register	C Black	Not applicable		
	Annual Complaints Report	C Black / Jo Collinson	Not applicable		
	Deep Dive - TBC	C Black / W Patten	Not applicable		

<b>Committee date</b>	<b>Agenda item</b>	<b>Lead officer</b>	<b>Reference if key decision</b>	<b>Deadline for reports</b>	<b>Agenda despatch date</b>
<i>15/08/19 Provisional meeting</i>				<i>02/08/19</i>	<i>07/08/19</i>
<b>12/09/19</b>	Business Planning	Tom Kelly / W Ogle-Welbourn	Not applicable	31/08/19	04/09/19
	Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) Annual Report	F Davies	Not applicable		
	Annual Safeguarding Board Report	R Waite	Not applicable		
	Deep Dive - TBC	C Black / W Patten	Not applicable		
<b>10/10/19</b>	Business Planning	Tom Kelly / W Ogle-Welbourn	Not applicable	28/09/19	02/10/19
<b>07/11/19</b>	Business Planning	Tom Kelly / W Ogle-Welbourn	Not applicable	25/10/19	30/11/19
	Adults Positive Challenge	C Black / T Hornsby	Not applicable		
<b>12/12/19</b>	Business Planning	Tom Kelly / W Ogle-Welbourn	Not applicable	29/11/19	04/12/19
	Full Evaluation of Neighbourhood Cares	L Tranham / C Black	Not applicable		
	Adults Self-Assessment	T Hornsby / C Black	Not applicable		
<b>16/01/20</b>	Adults Social Care - Service User Survey Feedback	H Duncan / C Black	Not applicable	03/01/19	08/01/20
	Delayed Transfers of Care (DTOC) Progress Report	C Black	Not applicable		
<i>13/02/20 Provisional date</i>				<i>31/01/20</i>	<i>05/02/20</i>
<b>12/03/20</b>	Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) Work Programme Update	F Davies	Not applicable	28/02/20	04/03/20
	Deep Dive - TBC	C Black / W Patten	Not applicable		

<b>Committee date</b>	<b>Agenda item</b>	<b>Lead officer</b>	<b>Reference if key decision</b>	<b>Deadline for reports</b>	<b>Agenda despatch date</b>
<i>23/04/20 Provisional date</i>				<i>10/04/20</i>	<i>15/04/20</i>
<b>21/05/20</b>	Deep Dive - TBC	C Black / W Patten	Not applicable	08/05/20	13/05/20

To be programmed:

- Review of the number of people waiting for a change to their current domiciliary care service, or for a new package of domiciliary care (monitoring item identified at meeting on 8 March 2018)
- Adult Early Help / Prevention / Early Intervention (J Galwey)
- Learning Disability Partnership Section 75 and pooled budget arrangements (Will Patten)

**Adults Committee Training Plan 2018/19 – updated 18 December 2018****Agenda Item: 10**

Below is an outline of dates and topics for potential training committee sessions and visits. The preference would be to organise training and visits prior to Committee meetings and utilising existing Reserve Committee dates:

<b>Date</b>	<b>Timings</b>	<b>Topic</b>	<b>Presenter</b>	<b>Location</b>	<b>Audience</b>
12 April 2018	2:30 - 4:30pm	Adults Positive Challenge	Geoff Hinkins	KV Room	Completed
Friday 12 October 2018	10.30am – 12.30pm This overview will be on the agenda at this Members seminar	An overview of Mental Health	Katrina Anderson	Kreis Viersen Room, Shire Hall, Cambridge.	Completed
Friday 26 October 2018	9.00am – 5.00pm	A service-users journey  Induction to early intervention and prevention: - ATT - Adults early help - Sensory - Reablement	Jackie Galwey	Various	Completed
Tuesday 6 November 2018	11.30am -1.00pm	Commissioning Services – what services are commissioned and how our services are commissioned across P&C	Oliver Hayward / Shauna Torrance	KV Room	Completed
Friday 16 November 2018  <b>OR</b>  Wednesday 20 February 2019	10.30am – 12.30pm  This overview will be on the agenda at this Members seminar	An overview of the Adults Social Care: - Support plans - Advocacy - Assessments - Performance To include LD, MASH, DoLs	Jackie Galwey	<i>Amunsden House / Hinchingsbrooke Hospital</i>	Completed
Tuesday 4 December 2018	9.00am – 5.00pm	Introduction to Learning Disability / Physical Disability	Tracey Gurney	Various	Cancelled - no attendees

Date	Timings	Topic	Presenter	Location	Audience
14 February 2019 (Utilise reserve meeting)	2.00pm - 5.00pm	Safeguarding: - Overview of safeguarding - Visit to the Multi-agency Safeguarding Hub (MASH)	Helen Duncan	Chord Park	All Adult Members
March 2019 - Date TBC		An overview of the Council's work in relation to Carers	Helen Duncan	March 2019	
TBC	2.00pm – 5.00pm	An overview of Adults social care finance	Stephen Howarth	TBC	All Adults Members
1 February TBC	This overview will be on the agenda at this Members seminar	Positive Behavioural Support	Emily Wheeler	TBC	
TBC	9.00am – 5.00pm	Introduction to Learning Disability / Physical Disability	Tracey Gurney	Various	
TBC		Site visit Huntingdon- TAG Bikes and Community Garden Project	Emily Wheeler	TBC	
TBC		Site Visit – Ely Community Café in Ely	Emily Wheeler	TBC	
As and when required		Neighbourhood cares	Louise Tranham	1 Member (tba)	Please contact Lesley Hart to arrange a visit or for further information.
		Counting Every Adult	Tom Tallon	1 Member (tba)	
		LD Provider Services	Emily Wheeler	1 Member (tba)	
		Discharge Planning Team	Social Worker	1 Member (tba)	

Reserve Committee dates for 2018/19:

- 14 February 2019