

Adult Social Care and Health Committee

Monday, 07 January 2013 at 10:30

County Hall, County Hall, West Bridgford, Nottingham NG2 7QP

AGENDA

- | | | |
|----|--|---------|
| 1 | Minutes of the last meeting held on 26 November 2012 | 3 - 6 |
| 2 | Apologies for Absence | |
| 3 | Declarations of Interests by Members and Officers:- (see note below)
(a) Disclosable Pecuniary Interests
(b) Private Interests (pecuniary and non-pecuniary) | |
| 4 | Performance Update of Adult Social Care | 7 - 14 |
| 5 | Improving Performance Information | 15 - 18 |
| 6 | Funding for Substance Misuse Social Work Posts | 19 - 22 |
| 7 | Adult Care Financial Services - BEDs Implementation Resource | 23 - 26 |
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| 9 | Reablement Service Update - Lings Bar Community Hospital
Enhanced Community Care Service | 31 - 36 |
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to Nottinghamshire County Council | 37 - 40 |
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Notes

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.
- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Paul Davies (Tel. 0115 977 3299) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.

minutes

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 26 November 2012 (commencing at 10.30 am)

Membership

Persons absent are marked with 'A'

COUNCILLORS

Kevin Rostance (Chairman)
Stuart Wallace (Vice-Chairman)
Ged Clarke
John Doddy
Rachel Madden
Geoff Merry
Alan Rhodes
Martin Suthers
Chris Winterton
Liz Yates
Jason Zadrozny

A Ex-officio (non-voting)
Mrs Kay Cutts

OTHER COUNCILLORS IN ATTENDANCE

Councillor Mel Shepherd

OFFICERS IN ATTENDANCE

Anita Astle, Managing Director, Wren Hall Nursing Home
Caroline Baria, Service Director, Joint Commissioning, Quality and Business Change
Allan Breeton, Independent Chair, Nottinghamshire Safeguarding Adults Board
Paul Davies, Democratic Services Officer
David Ebbage, Liberal Democrat Group Administration/Research Officer
Ben Fowler, Graduate Trainee
David Hamilton, Service Director, Personal Care and Support (Older Adults)
Jennie Kennington, Senior Executive Officer
Robert Knott, Group Manager, Credit Control and Payments
David Pearson, Corporate Director, Adult Social Care, Health and Public Protection
Amanda Sullivan, Chief Officer, Newark & Sherwood and Mansfield & Ashfield Clinical Commissioning Groups
Lisa Swift, Business Support Officer (Committee)
Karen Townrow, Assistant Democratic Services Officer
Anna Vincent, Independent Group Administration/Research Officer

Vicki Wells, Regional Head of Compliance, Care Quality Commission
Michelle Welsh, Labour Group Research Officer
Jon Wilson, Service Director, Personal Care and Support for Younger Adults

ADVERSE WEATHER CONDITIONS

David Pearson advised the Committee of the department's involvement in the County Council's emergency planning arrangements following the recent flooding in parts of the county.

PRESENTATION OF AWARDS

Councillor Rostance presented awards to runners-up in the Great British Care Awards 2012:

Care Team Award: Winsome Bedward, Sharon Sorensen, Adrian Brailsford, Simon Turner, Jacky Mortimer, Debbie Hollis, and Darren Hayward, Promoting Independence Workers, Broxtowe, Gedling and Rushcliffe Physical Disability Team

Care Trainer Award: Steph Pindor and Elise Adam, NHS End of Life Care Trainers

MEMBERSHIP

It was reported that Councillor Dr John Doddy had been appointed to the Committee in place of Councillor Liz Yates, and that Councillor Yates had been appointed in place of Councillor Adair.

DECLARATIONS OF INTEREST

There were no declarations of interest.

QUALITY IN CARE SERVICES

Caroline Baria, Vicki Wells, Amanda Sullivan and Anita Astle gave a presentation on the respective roles of the County Council, Health, Care Quality Commission and care providers in monitoring and improving the quality of care services. They responded to wide-ranging questions from members. A report on the current work taking place in relation to dignity in care was requested.

RESOLVED: 2012/056

That the work undertaken by the key statutory agencies and by care providers in monitoring and/or ensuring good quality care services across Nottinghamshire be noted.

NOTTINGHAMSHIRE SAFEGUARDING ADULTS BOARD

RESOLVED: 2012/057

That the six-monthly report of the Independent Chair of the Nottinghamshire Safeguarding Adults Board be noted.

OVERVIEW OF ADULT SOCIAL CARE AND HEALTH SAVINGS AND EFFICIENCIES PROGRAMME

RESOLVED: 2012/058

That the report be noted.

EXTENSION OF TEMPORARY POST OF PROJECT MANAGER, DISABLED PARENTS AND YOUNG CARERS

RESOLVED: 2012/059

That approval be given to the extension of 1 fte (37 hours) temporary Project Manager (Young Carers and Disabled Parents) in Joint Commissioning, Quality and Business Change, Pay Band B, scp 34-39 (£28,636 - £32,800 pro rata per annum) from 1 January 2013 to from 1 January 2014, and the post continue to be allocated approved car user status.

SHARED LIVES UPDATE

RESOLVED: 2012/060

- (1) That the progress made to develop the Shared Lives Service be approved.
- (2) That the Shared Lives Service Policy be approved, and recommended for adoption by Policy Committee at its next meeting.

REVISED STRUCTURE FOR COUNTY ENTERPRISE FOODS

RESOLVED: 2012/061

That approval be given to following changes to the staffing structure at County Enterprise Foods:

- (1) The disestablishment of the following un-used and already vacant posts with effect from 31 January 2013:
 - 1 fte (37 hours) Reviewing Officer (Grade 5 SCP 24-28)
 - 13.62 fte (503.94 hours) Drivers (Grade 2 SCP 9-13)
 - 1 fte (37 hours) Administration Assistant (Grade 2 SCP 9-13)
 - 1 fte (37 hours) Operations Manager Production (Hay Band B SCP 34-39)
 - 1 fte (37 hours) Unit Operations Assistant (Grade 2 SCP 9-13)
 - 0.38 fte (14.06 hours) Operations front line supervisory staff (Grade 4 SCP 19-23)
 - 0.25 fte (9.25 hours) Production/delivery front line supervisory staff (Grade 3 SCP14-18)
- (2) The disestablishment of the following post with effect from 31 January 2013:
 - 1 fte (37 hours) Operations Supervisor Distribution (Grade 5 SCP 24-28)

- (3) The permanent establishment of the Team Leader Market Development and Operations post (Hay Band B SCP 34-39), with effect from 31 January 2013.

COMMISSIONING FOR OLDER PEOPLE'S HOME-BASED SUPPORT AND PREVENTION FOCUSED SUPPORT SERVICES

RESOLVED: 2012/062

- (1) That the programme of work being undertaken to review the older people's home-based care and support services, including prevention-focused services, be noted;
- (2) That approval be given to extending the existing contracts with the home care providers and with the providers of the Supporting People funded older people's services, for a period of up to 12 months;
- (3) That it be noted that there will be a 12 month delay in the delivery of the savings and efficiencies to the sum of £2.4m, from April 2013 to April 2014, arising from the delay in the tender process.

WORK PROGRAMME

RESOLVED: 2012/063

That the work programme be noted, and a report on the work to promote dignity in care be presented to a future meeting.

The meeting closed at 1.10 pm.

CHAIRMAN

7th January 2013

Agenda Item: 4

**REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE,
HEALTH AND PUBLIC PROTECTION****PERFORMANCE UPDATE OF ADULT SOCIAL CARE****Purpose of the Report**

1. To provide an update on the performance management for the Adult Social Care and Health Committee, for period 1st April to 30th September 2012.

Information and Advice**Performance Management**

2. The report provides a half-year update on progress against key performance measures and operational priorities. It is also an opportunity to discuss new developments in how the department manages performance and tracks progress against strategic and departmental objectives.

Strategic Plan ASCH&PP Performance Indicators

3. As part of the corporate performance management framework, departmental performance is checked to ensure it is on target to achieve the corporate priorities in the Strategic Plan. In addition to this, a number of key measures are reported monthly to the Corporate Leadership Team as they have been identified as of high importance / risk by the department. **Appendix A** includes all the above performance measures, showing the performance level as at 30th September 2012, the annual target and a commentary explaining the current level of performance.
4. A key objective in the Strategic Plan was 'to give more people greater choice and control over how they get the support they require to stay healthy and live independently for as long as possible'. The actions being taken to support this objective involves enabling more people to live independently in their own home, encouraging more people to manage their own care through the use of a personal budget and reducing the overall number of people in residential care.
5. A key method of achieving this objective and a main focus for the department is Reablement. This work involves service users regaining their skills and confidence to help them live as independently as possible. Reablement support workers provide up to six weeks of intensive support to services users in their own home, enabling them to do as

much as they can for themselves. A key measure of the success of Reablement is whether, through intervention by the County Council, service users can live independently and require either no further support or a reduced level of support. Performance for the first six months of 2012/13 is on target with 65% of service users benefiting from an intervention and, therefore, requiring less ongoing support.

6. In addition to Reablement, service users are being enabled to manage their own care through the use of a personal budget. This is an important way to give them more choice and independence. The Council's performance to date is very positive, with more people than ever managing their own care – as the percentage of adult social care service users and carers in Nottinghamshire now receiving a personal budget stands at 79%. This is better performance than targeted for and places Nottinghamshire amongst the top performers nationally.
7. Building on this success, countywide information events have taken place recently, held at Worksop, Kirkby-in-Ashfield and the Carlton area of Nottinghamshire. The events involved employees, service users and personal assistants and helped to both celebrate progress to date and tackle the challenges ahead. Feedback obtained from those who attended via the evaluation forms was positive with attendees finding the sessions interesting and informative. Further events are intended in the nearer future.
8. With an emphasis on helping people remain independent and in their own home, the Council is also trying to reduce the number of adults reliant on residential or nursing care. The past 6 months has seen a modest reduction in the number of adults supported in residential and nursing care placements (from 2,940 to 2,874). Although this is not currently the performance level the Council targeted to achieve, given that the older adult population has increased by 15.8% between 2001 and 2011 any reduction in overall numbers could be considered as positive performance.
9. However, the Council wants to continue to try to reduce admissions into long-term care. In order to help achieve this Strategic Plan priority, the 'Living at Home Programme' has been re-launched which brings together a range of services that gives local people and their carers more choice and control over where they live. Currently the trend in Nottinghamshire shows that there are more people supported in long-term care than receiving home-based community support. The Council is working to help develop a range of services that can help to return people to previous levels of independence.

ASCOF Benchmarking

10. ASCOF stands for Adult Social Care Outcomes Framework and is an annual return designed to measure and compare how adult social care is performing and more importantly what it has achieved. The purpose of the ASCOF is essentially two-fold; nationally, the ASCOF will give an indication of the strengths of social care and its success in delivering better outcomes for people who use services. Locally, one of the key uses of the ASCOF is for 'benchmarking' performance and comparison between local authorities. As all authorities collect the data in approximately the same way, it means the authorities can compare the results with each other to determine respective strengths and weaknesses.
11. The Council has recently received the provisional data for 2011/12 and has used it to compare performance with both the ten local authority adult social care service providers in

the East Midlands and against performance levels nationally. ASCOF has 18 interconnected measures overall and it is pleasing to note, Nottinghamshire's performance is above average for 13 of the 18 measures. However, as with all benchmarking, ASCOF provides an indication of relative performance and as provisional data has been used – this is subject to possible change.

12. Despite these reservations, the comparison with our East Midlands neighbours is an interesting and useful exercise to help determine relative strengths and weaknesses. It also helps demonstrate which local authorities are leading on specific issues. For example, Nottinghamshire leads the East Midlands in relation to the percentage of service users receiving personal budgets. The authority is keen to promote this success and share the lessons learnt from that achievement. As a practical example, Nottinghamshire recently hosted the East Midlands Performance Network and the Group Manager – Customer Access / Social Care led a presentation on how the County Council has achieved this level of performance. The sharing of our experience and expertise was greatly appreciated by the attendees from other local authorities. However, it is equally important that the County Council recognises the need to improve in all areas and continues to learn from other local authorities who are performing at a higher level in different aspects of adult social care.

Summary

13. The report seeks to provide Members with a brief summary of performance for the first six months of 2012/13, with a specific focus on key strategic performance measures. The department will continue to improve performance management through finding the right combination of focussing on our own data, comparing and learning with others and understanding the views and needs of service users.

Reason/s for Recommendation/s

14. This report is for information only and there are no specific recommendations to be made.

Statutory and Policy Implications

15. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Human Resources Implications

16. The Human Resources-related performance outcomes are reflected in the report.

RECOMMENDATION/S

It is recommended that the Committee notes the content of the report.

DAVID PEARSON

Corporate Director for Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

Judith Horsfall

Group Manager, Operational Policy and Performance

Email: judith.horsfall@nottsc.gov.uk

Constitutional Comments

17. There are no constitutional comments as this report is for noting purposes.

Financial Comments (NDR 29/11/2012)

18. There are no financial implications arising directly from the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972:

- (a) [Transparency in outcomes: a framework for quality in adult social care - The 2012/13 Adult Social Care Outcomes Framework](#) – March 2012.
- (b) Adult Social Care Outcomes Framework 2011/12 – [Charts](#).

Electoral Division(s) and Member(s) Affected

All.

ASCH79

APPENDIX A

Key ASCH Performance Indicators – As at 30th September 2012

Indicator	Value	Target	Commentary	Lead
Adult social care clients and carers receiving community based services via a direct payment or personal budget High is good	79%	60%	Performance continues to be very positive, well in excess of our targeted figure. We are currently performing best in the East Midlands and in the top ten authorities nationally. No authority achieved over 78% during the previous financial year (2011/12)	Paul McKay
Total number of older people (aged 65 and over) supported in residential and nursing care placements Low is good	2,874	2,691	Following the re-launch of the 'Living at Home Programme' and our continued priority of helping people to remain independent and in their own home as long as possible, we have seen a sustained reduction in admissions to long-term care. If our performance follows national trends and we can maintain this improvement in the admission rate we will see an overall reduction of numbers in long-term care over the next 12 to 18 months	David Hamilton
Delayed transfers of care from hospital attributable to adult social care Low is good	1.64	2.00	This is the latest update available and is from August. This forms a subset of the main indicator and reflects delays attributed to social care only. The rate per month (1.64) compares well against the same period for the previous year (2.6). The introduction of reablement teams has assisted in the reduction of delays in some local hospitals. (However, the combined figure for delays being the	David Hamilton

Indicator	Value	Target	Commentary	Lead
			responsibility of both Health and Social Care is performing below the targeted level. Further investigation into the underlying causes and possible solutions are ongoing)	
Percentage of service users going through reablement requiring no ongoing package High is good	49.5%	40.0%	Exceeding the departmental target of reabling 40% of service users. This means as a whole; reablement is on target for 65% of service users requiring no or less ongoing package following reablement	Paul McKay
The percentage of plans created where steps have been identified that can manage or reduce the risk of further abuse. High is good	58%	60%	We have changed the way safeguarding plans are measured following changes to the way this information is recorded. The new way of recording and measuring is more reliable and consistent and allows for easier monitoring. Initial results are positive, and the safeguarding team will work with operational teams to ensure that this performance is maintained.	Caroline Baria

Indicator	Value	Target	Commentary	Lead
<p>Adult social care clients and carers receiving community based services as a direct payment</p> <p>High is good</p>	28.6%	16.5%	<p>The department saw an increase of 203 direct payments this month bringing the total to 3,396 or 29%. 43% of service users aged 18-64 and 19% of service users aged 65+ are having their personal budget as a direct payment. Performance for this measure remains good in comparison with the recent provisional ASCOF data – where we were above both the national and East Mids average for 2011/12. Performance during the first 6 months of 2012/13 has continued to improve</p>	Paul McKay
<p>Percentage of service users going through reablement requiring reduced package of support</p> <p>High is good</p>	26.3%	25.0%	<p>The performance in relation to the overall picture for reablement continues to be on target for the department. This is comprised of those service users who require no ongoing package (detailed on the page above) and this measure. It is important to view the two measures in conjunction to as they are complementary. Reablement continues to be a key priority for the department.</p>	Paul McKay
<p>Service users with a learning disability living in their own home or with their family</p> <p>High is good</p>	68.3%	70.0%	<p>Following changes to the guidance on how this measure should be collected further statistical analysis is being undertaken to ensure that the data used to calculate the number of adults (18-64) with learning disabilities in paid employment / who live in their own home or with their family - is accurate and consistent. Following completion of this work, we will review current performance, the year-end target and any necessary remedial actions in conjunction with the Service Director - Personal Care and Support (Younger Adults).</p>	Jon Wilson
<p>Service users with a learning disability in paid employment</p> <p>High is good</p>	8.1%	10.0%		Jon Wilson

7th January 2013**Agenda Item: 5****REPORT OF THE SERVICE DIRECTOR FOR JOINT COMMISSIONING,
QUALITY AND BUSINESS CHANGE****IMPROVING PERFORMANCE INFORMATION****Purpose of the Report**

1. This report seeks approval to extend the Improving Performance Project within the Performance Improvement team focusing on the key area of data quality and to extend the temporary Performance Data Analyst post for a further nine months to the 30th September 2013.

Information and Advice

2. The project was established initially to carry out specific work around the quality of the data held about service users and their services in the Adult Social Care operational database.
3. Initially, the work involved identifying key items where the quality of data held on the system could be improved. Work to date has significantly improved the quality of the information and supported staff to 'get it right first time'. It has also led to a culture change in the department and identified areas where further training and support was required.
4. The number of fields where data was missing such as gender or service user group has dropped from 952 to 108 during the period from the potential total of 26,670 fields of data.
5. Currently, a new reporting system is being reviewed and the work of the project would enhance the development of this by building on the current success and establishing a set of reports and criteria to enable the continuous improvement in this key area of work. It is expected that to support the changes to a new system and to embed the new processes as business as usual would take a further nine months.
6. The principles on which the work is based has led to an overall improvement in the awareness of staff in recording data correctly. The scope of the project has widened to consider additional areas that would benefit from enhanced information and developing new processes to measure and support improvement. For example, in the commissioning of services.
7. The temporary post of 1 fte Performance Data Analyst (Hay Band A £24,646 - £28,636) was previously established at the discretion of the Corporate Director for Adult Social Care, Health and Public Protection for a period of three months. This report seeks approval to extend this temporary post for a further 9 months to 30th September 2013.

Other Options Considered

8. Existing workloads have been reviewed to determine whether this work could be completed within current resources and it has been concluded that project capacity is required.

Reason/s for Recommendation/s

9. Without the funding the gains in data quality may be lost if systems and support mechanisms are not put in place to support it. This would jeopardise the good work that has already been done and any future plans to roll-out training and support where most required.
10. Better data quality leads to a better understanding of our measurements and business drivers. It helps to offer confidence in our measures and ensures we have a true understanding of our service users. It also helps to reduce costs associated with rectifying inaccurate or incomplete data.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

12. The proposal has a one-off cost of £21,257 including on-costs and this will be funded from vacancy savings that have accrued against the Performance Improvement Team's existing establishment for 2012/13.

Equalities Implications

13. This project will enhance the information the department holds on ethnic origin and gender to help target and plan services ensuring there is a good understanding of service user groups.

Crime and Disorder Implications

14. This project will promote and enhance adult safeguarding through improving the quality of data held on service users.

Human Resources Implications

15. The temporary Performance Data Analyst post was initially established for 3 months at the discretion of the Corporate Director for Adult Social Care, Health and Public Protection as part of his delegated authority as outlined in the Employment Procedure Rules (Part 6, page 105, paragraph 26 of the Constitution).
16. This report seeks to extend one temporary Performance Data Analyst, Band A, scp 29-34 (£24,646-£28,636 per annum pro rata); until 30th September 2013. The officer will join the Performance Improvement Team and will be based at County Hall.

17. The Trade Unions have been consulted and there were no comments arising.

RECOMMENDATION/S

It is recommended that:

- 1) The Improving Performance Project within the Performance Improvement team be extended
- 2) 1 fte (37 hours) temporary Performance Data Analyst, Band A, scp 29-34 (£24,646-£28,636 per annum pro rata) be extended for a further 9 months until 30th September 2013 and be based in the Performance Improvement Team at County Hall.

CAROLINE BARIA

Joint Commissioning, Quality and Business Change

For any enquiries about this report please contact:

Anne Morgan
Performance Improvement Team Manager
Email: anne.morgan@nottsc.gov.uk
Tel: (0115) 97 72706

Constitutional Comments (LMc 05/12/2012)

18. The proposals in this report are within the remit of the Adult Social Care and Health Committee.

Financial Comments (NDR 29/11/2012)

19. The financial implications are contained in paragraph 12 of the body of the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972:

- (a) Business Case for temporary establishment.

Electoral Division(s) and Member(s) Affected

All.
ASCH80

7th January 2013

Agenda Item: 6

REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND SUPPORT – YOUNGER ADULTS

FUNDING FOR SUBSTANCE MISUSE SOCIAL WORK POSTS

Purpose of the Report

1. The purpose of this report is to seek approval for permanent funding of £55,314 for social work posts in Substance Misuse and to recommend a change in line management. This funding previously came from Nottinghamshire Primary Care Trust (PCT). The PCT have given notice of withdrawal of this funding from 1st April 2013.
2. The report also seeks permission to consult with partners and other stakeholders on the proposal to review existing funding allocated to substance misuse residential rehabilitation services with a view to only fund the explicit social care elements of placements rather than continuing to fund therapeutic interventions as is the case currently.

Information and Advice

3. A new specification for the provision of Substance Misuse services has been drawn up by NHS Nottinghamshire County reflecting a new model of integrated substance misuse service (drugs and alcohol) for 2012/13. The service model will be rooted in local communities through a network of Recovery Centres.
4. Operating under one roof, Recovery Centres will facilitate local access to fully integrated services and co-located multi-disciplinary teams. This will help service user with choice, with clear links and access points into other services and social networks based in the local community. The aim will be to ensure that service users, families and carers will be able to access as many of the services as they need within the Recovery Centre itself.
5. Nottinghamshire County Council has supported three social workers in Substance Misuse Services for over 15 years. Historically, these posts were situated in NHS Trust services at The John Storer Clinic, Nottingham covering the south of the county and The Maltings, Mansfield for the north of the County. These posts were established through joint funding with the NHS and managed by health staff, working predominantly to a health agenda. As part of the review of the commissioning of substance misuse services it has been agreed that these posts should focus to deliver social care assessment and care management services to people who are eligible for social care support, rather than the provision of therapeutic services in the health settings, which can more properly be provided by NHS colleagues.

6. In the recent Organisational Redesign project, it was decided to maintain the three posts but bring them back under the management of the locality Mental Health Teams. Therefore, there is a Substance Misuse post for each locality at Broxtowe covering the south of the county, at Mansfield/Ashfield and at Newark/Bassetlaw. This is timely for the workers to establish themselves as part of the Recovery Centres and to ensure there is appropriate access to social care for people using these centres.
7. As part of the reconfiguration of services, the County Council together with NHS Nottinghamshire are reviewing the respective responsibilities of each organisation to ensure there is a correct delineation of health and social care responsibilities. Specifically this relates to the funding requirements of social work services and residential rehabilitation services.
8. NHS Nottinghamshire has given notice that they intend to withdraw their funding contribution towards social work posts, from April 2013. This leaves a funding gap of £55,314 to support the three social workers. Members are asked to approve the continued support to the three posts.
9. At the same time the County Council are reviewing the payments made to residential care providers for rehabilitation services to ensure the authority is only paying providers for services which are of a social care nature. This would include basic accommodation costs together with any personal care requirements, but would exclude any therapeutic activities which may properly be counted as health provisions.
10. Each year the County Council approves a base rate fee for residential care services, which currently stands at £371 per week in relation to substance misuse services, however the average cost of residential care placements is £548 per week. This is because the County Council currently contributes to additional therapeutic type activities within the placements. Therefore, it is estimated that only paying for social care provisions could reduce the County Council expenditure in this area by up to £177 per week per placement on average. Members are asked to approve this approach, and to agree to a period of consultation with relevant stakeholders.
11. The authority has a legal responsibility to provide assessment and meet the social care needs of people with substance misuse problems. A large part of the work undertaken by the social workers will be assessing people for residential rehabilitation placements. These are funded from the Mental Health Community Care Budget. To ensure that available funds are used effectively, it is proposed that access to this funding will be by application to a funding panel that will be set up in 2013. It is also proposed that there will be changes in the way that these placements are funded and that only the board and lodgings costs and any other social care elements of the placements will be paid for by the Community Care Budget, with the therapeutic elements of these placements funded by the NHS. Consultation on these changes will be required. By seeking appropriate funding for the placements from the NHS and establishing greater control and attention to eligibility criteria, the demand on the community care budget will be better managed and the additional funding for the staff will be recouped.

Other Options Considered

12. The County Council has a statutory duty to provide assessment and care management services to people with substance misuse and alcohol related problems where they meet the Fair Access to Care services criteria. The council must also meet any eligible social care needs that are identified through the community care assessment. Therefore no other options are considered appropriate other than maintaining the capacity to undertake this work.

Reason/s for Recommendation/s

13. It is important to have specialist social workers, working alongside partners in the Recovery Centres to ensure there is social care offer for people using these services. Having social workers with specialist knowledge managing requests for social care funding, will be beneficial in managing demand and ensuring proper governance is in place. The additional funding being requested will ensure continuation of these posts. In funding these posts the authority will be in a position to ensure greater involvement and oversight of the care management process to ensure that only the social care elements of residential rehabilitation packages are funded by the authority.

Statutory and Policy Implications

14. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Human Resources Implications

15. The current structure of the department places these posts in different teams across the County. However, in reconfiguring this service, it is proposed that the management and funding for these posts is transferred to the Broxtowe and Hucknall Community Mental Health team manager. The social work posts will be located within each of the localities as detailed within the report, however the management function will be co-ordinated through a single line manager to ensure consistency across the County and improve liaison with health colleagues. This will also ensure that the management function and the funding sit in the correct place on the authority's Business Management System. This would be a minor change to the Organisational Redesign structure agreed by this Committee on 3rd September 2012.
16. The Trade Unions have been consulted. Unison has no comments to make and feel that this is a worthwhile project.

Financial Implications

17. The additional cost to the authority of funding the posts following the withdrawal of NHS funding is £55,314 per annum. This cost will be met by the reduction in funding to the residential care budget of applying a different approach to meeting social care needs. It is estimated that this will achieve a net saving of £96,000.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) approve that £55,314 be committed as permanent funding to the 3 fte social work posts in Substance Misuse to maintain a countywide social work service in this specialist area.
- 2) approve that the 3 fte (111 hours) Social Workers (substance misuse) be moved under the line management of the Team Manager for the Broxtowe and Hucknall Community Mental Health Team with effect from the date of committee.
- 3) Approve a period of consultation on the proposal that from April 2013, the Council only funds the social care element of residential placements for substance misuse and that any therapeutic element of the placements is sought from the NHS, and that a further report be presented to committee on the outcome of the consultation.

JON WILSON

**Service Director for Personal Care and Support – Younger Adults
Adult Social Care, Health and Public Protection**

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Constitutional Comments (KK 06/12/2012)

18. The proposals in this report are within the remit of the Adult Social Care and Health Committee.

Financial Comments (NDR 23/11/2012)

19. The financial implications are set out in paragraph 17 of the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- (a) A Council Fit for the Future: A New Structure for Operational Teams in Scope for Tiers 5 to 7 in Adult Social Care, Health and Public Protection - 3rd September 2012, Adult Social Care and Health Committee (Previously Published).

Electoral Division(s) and Member(s) Affected

All.
ASCH76

7th January 2013**Agenda Item: 7****REPORT OF THE SERVICE DIRECTOR FOR JOINT COMMISSIONING,
QUALITY AND BUSINESS CHANGE****ADULT CARE FINANCIAL SERVICES – BEDS IMPLEMENTATION
RESOURCE****Purpose of the Report**

1. The purpose of the report is to seek approval to establish one temporary Finance Assistant post within Adult Care Financial Services (ACFS) team for a period of six months commencing February 2013.

Information and Advice

2. ACFS make payments to independent sector care home providers in accordance with the terms and conditions of their contract with Nottinghamshire County Council. A new IT system is being developed to enable streamlining of the payment process (BEDS) and also to gather information on vacant beds and the numbers of self-funders in individual homes.
3. 'BEDS' is a new web-based computer system which provides Nottinghamshire County Council with up-to-date information about care home occupancy and vacancies for emergency planning purposes. It also records care homes admitting residents who are self-funding and enables a referral to be made on behalf of the resident to Paying for Care to facilitate the provision of independent financial advice for self-funders. It is expected that with appropriate financial advice and support provided to self-funders when they move into care homes they will be able to help protect their assets for their families and the likelihood of them requiring Local Authority funding for their care in the future will also be reduced and the financial burden to the Local Authority reduced. When fully implemented BEDS will also provide an electronic process for care homes communicating with ACFS about resident admissions, discharges, deaths and provides an electronic portal for care homes and ACFS to manage the payment process.
4. The system is currently available to the 168 Quality Banded Nottinghamshire Older Persons homes and needs to be rolled out to a further 500 care homes. The additional care homes are Younger Adults homes in the county of Nottinghamshire, care homes within the City of Nottingham, Nottinghamshire County Council's remaining local authority run homes, care homes outside of Nottinghamshire with which we contract and fund residents and Shared Lives carers and Short Breaks units.

5. The post is required to assist with the roll out of the system to these providers and to provide administrative support until an electronic solution to feed data from the current financial system, Abacus, to BEDS is implemented. It is anticipated that an electronic solution will be ready for testing in early 2013. It will, however, not be fully implemented until April 2013 and therefore this post is required to continue to carry out the manual reconciliation of the two systems and the manual maintenance of the data within the BEDS system.
6. The post holder will also create and update training material, liaise with existing care home users to resolve queries and provide training assistance, gather and compile details required to set up users accounts for new users at the homes and participate in launch events set up for the additional care homes. Once the electronic system is implemented the post holder will assist with the roll out of BEDS to all care homes.
7. The position has been filled by a temporary member staff which was agreed by the Corporate Director of Adult Social Care, Health and Public Protection, initially for three months. It is anticipated that this post will be needed for a further 6 months from 1st February 2013.

Other Options Considered

8. Serious consideration has been given to covering this work within existing resources. Over the past 12 months, whilst reviewing the structure and making significant savings, the workload within ACFS has increased because of the Fairer Contribution to Care policy and the introduction of Personal Budgets. This has necessitated dual running of two charging policies whilst existing service users are moved onto a personal budget. Changing to the Fairer Contributions Policy has also resulted in increased enquiries from service users and carers that require investigation and detailed responses. This means that it is not possible to carry out the work required for BEDS within existing resources.
9. The implementation and management of the BEDS system sits within the Residential Assessments team within ACFS who manage all payments to care homes and financial assessments for residents and casework associated with work under the mental capacity act and complex property-related work.

Reason/s for Recommendation/s

10. The post will assist all care providers to transfer to the BEDS system which will provide information on self-funders, vacant beds and streamline the payment process.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

12. The cost of a Grade 3 Finance Assistant post for 6 months will be £9,730 including on costs. The funding has been agreed from departmental reserves.

Human Resources Implications

13. The Human Resources implications have been considered and appointment to the post will be within the Corporate Recruitment process.
14. The temporary Finance Assistant post was initially established for 3 months at the discretion of the Corporate Director as part of his delegated authority as outlined in the Employment Procedure Rules (part 6, page 105, paragraph 26 of the Constitution).
15. The Trade Unions have been consulted and would prefer that the position was permanent.

RECOMMENDATION/S

It is RECOMMENDED that:

- (a) 1 fte (37 hours) temporary Finance Assistant, Grade 3, scp 14-18 (£15,725 - £17,161 pro rata per annum) be extended for a further 6 months from the 1st February 2013 to 31st July 2013 and based in the Adult Care Financial Services team at County Hall.

CAROLINE BARIA

Service Director, Joint Commissioning, Quality and Business Change

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Constitutional Comments (LMC 18/12/2012)

16. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (TMR 29/11/2012)

17. The temporary position will be funded from departmental reserves.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

ASCH81

7th January 2013

Agenda Item: 8

REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND SUPPORT (YOUNGER ADULTS)

SOCIAL CARE WORKFORCE EFFICIENCY PROJECT

Purpose of the Report

1. This report informs the Committee of the work completed on an activity analysis relating to adults social care staffing and seeks approval for a further piece of work to identify efficiency savings within the Social Work establishment.

Information and Advice

2. As part of the Organisational Redesign project, an activity analysis was undertaken to identify areas where a more efficient use of social care workers' time could be identified in order to ensure that a smaller staff establishment would be able to meet the increasing demand for services in the future.
3. Phase one of the social care workforce analysis has provided some useful insights into the time being spent by social workers on their core, support and diversionary activities during the course of their working day.
4. However, the current approach and resources available are unable to generate sufficient volume of observations to provide a reliable sample size.
5. The first phase of the research indicated a number of areas for further exploration as they offered opportunities for time and cost savings. These include:
 - Reallocation of core and non-core tasks
 - Potential for reducing travel time
 - Improving Frameworki navigation, processes and data quality.
6. The extended analysis will provide a more robust and representative basis for investigating each of these areas in more depth, as well as potentially identifying further areas of opportunity through a thorough analysis of the activities of social workers within each service area and across each region within the county.
7. The research is to be conducted within a single one month period to ensure that the observations are made under consistent conditions. Spreading the research over a longer period in a highly changeable environment could skew the results. Roles other than social

workers are not to be included within the analysis but the learning and efficiency gains achieved will be replicable across other staff groups.

8. The proposed scope will ensure that the data gathered reflects any statistically significant variances between service areas and geographies in the:
 - Mix of activities performed and the spread between core processes and professional support.
 - Way in which processes are applied through the social care pathway.
 - Extent to which the findings of the work performed to date are confirmed and the validity of the potential opportunities described above.
 - Identification of opportunities for process improvement and cashable benefits.
9. It is proposed to utilise social care students to shadow front line social care staff and record activity types, volumes and timings. The Research Officer would lead research and provide training and templates to capture the details of the observations. The observations would be performed over the course of one month. It is assumed that the university would release the students to work as unpaid interns on the basis that the research activity would be a valuable learning exercise and could count towards their qualifications. An approach is being made to Nottingham University to establish the availability of the students with a response expected by 21 December 2012. It is planned to commence the research in February 2013.
10. The advantage of this approach is that the students would have a good level of understanding of the workings of a social care department and familiarity with the nature of the work to be observed. Additionally the students are likely to be engaged by the nature of the research and see connections with their own studies and professional development, and data gathering will be through an impartial source.
11. However the students are likely to require considerable support and training to ensure that they collect relevant and comprehensive data. The existing temporary Research Officer post which has undertaken the initial pilot work will require further extension in order to provide support for this project. The incremental costs for the Research Officer would be approximately £14,000 (plus on costs) for a six month period, covering the set-up, monitoring and evaluation of the research.

Other Options Considered

12. The department has considered hiring agency staff to conduct the research in the same manner as described above. The incremental costs for the agency workers would be in the region of £98,000 for the period of data collection. The incremental costs for the Research Officer would be approximately £14,000 (plus on costs), as stated above. The advantages of this approach would be that suitable resources are likely to be readily available in the current employment climate, and data gathering will be through an impartial source. However, the disadvantages are that the level of costs is significantly higher than for the recommended option, the agency workers would be likely to need far more initial training and familiarisation. It may be more challenging to motivate agency staff to be scrupulous in their recording over the course of the research period, and there is a higher potential for misreporting by a data gathering team who have little or no knowledge of the subject matter.

13. Consideration was also given to self reporting by staff. The Research Officer would develop recording templates and guidance to equip front line social care staff to record their activities during the course of a month. The advantages of this approach would be that it is a low cost and relatively straightforward option to implement quickly. However, the disadvantages are that staff have already expressed concern that they are working to full capacity and this approach would create additional workload pressures. Previous experience of self reporting has resulted in inconsistent and poor recording resulting in low quality data, and self-recording tends to involve some subjectivity in what is and what is not recorded, by staff who may have a conflict of interest.

Reason/s for Recommendation/s

14. The proposed option is considered to be the superior solution for the following reasons:

- It requires a comparatively low level of investment compared to the use of agency staff
- The students will have a higher level of interest/engagement in the research
- Less training and familiarisation effort will be required in preparation
- The research will be more objective and reliable than would be the case with self-recording
- It will have less impact on the working patterns of those workers who are the subject of the research than the self-recording or agency staff options.

Statutory and Policy Implications

15. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Human Resource Implications

16. The current temporary post of Research Officer Hay Band A would be extended for a period of six months to oversee the analysis and develop an efficiency savings plan. This post is based at County Hall and is subject to an approved car user allowance.

Finance Implications

17. The extension of the temporary Research officer post will require additional funding of £14,318 (plus on costs). In addition funding may be required to provide either hourly rate to the students or travel and expenses. It is estimated that the cost of an hourly rate payment would be £45,000 or alternatively the cost of travel and expenses only would be £10,000. These costs will be funded by the Improvement Programme.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee approve:

- 1) The engagement of social care students to undertake the further analysis and research of Social Worker activity under the supervision of the Research Officer.
- 2) The extension of the temporary post of Research Officer, Hay Band 'A' (£24,646-£28,636 per annum) for a period of six months from the 31st January 2013 until 31st July 2013 and the post be allocated approved car user status.

JON WILSON

Service Director, Personal Care and Support Younger Adults

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Constitutional Comments (LMC 20/12/2012)

18. The Adult Social care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (NDR 20/12/12)

19. The financial implications are set out in paragraph 17 of the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Electoral Division(s) and Member(s) Affected

All.

ASCH82

7th January 2013

Agenda Item: 9

REPORT OF THE SERVICE DIRECTOR FOR PROMOTING INDEPENDENCE AND PUBLIC PROTECTION

REABLEMENT SERVICE UPDATE – LINGS BAR COMMUNITY HOSPITAL; ENHANCED COMMUNITY CARE SERVICE (ECCS)

Purpose of the Report

1. The purpose of the report is to provide an update on the progress of transforming community services through the innovative partnership work and jointly funded services between Health and Social Care at Lings Bar Community Hospital in Rushcliffe.

Information and Advice

Reablement Services and the role of the Community Hospitals

2. The Reablement Services are made up of a range of services which deliver social care assistance focused on providing people with essential skills for daily living. These services provide people with the essential skills to enable them to live more independently and reduce their need for ongoing homecare support following rehabilitation.
3. In partnership with Health this service includes two community hospitals:
 - Mansfield Community Hospital – Mansfield and Ashfield
 - Lings Bar Community Hospital – Rushcliffe.

What does a Community Hospital do?

4. Community Hospitals provide people with a rehabilitation service when they are recovering from either a trauma which resulted in an admission to an acute setting e.g. Queens Medical Centre, City Hospital or Kings Mill Hospital and are not deemed to be medically stable or sufficiently reabled to return to their own home.
5. Community hospitals cater for a range of patients and provide an essential discharge facility for the acute hospitals for moving patients through the care pathways to maximise services and ensure no delayed transfers of care. As such they play a crucial role in enabling the County Council to meet our statutory duties in ensuring timely and appropriate discharges from the acute hospitals.

6. Since bringing the Community Hospitals into the reablement services the authority have managed to ensure that there are no delayed discharges. This has been achieved through improving the patient pathways by working on the development of both the reablement service over the last 12 months and the innovative jointly funded work outlined in the pilot.
7. Following a utilisation review of health care provision, which had investigated the use and occupancy of in-patient admissions at Lings Bar Hospital, Mansfield Community Hospital and Ashfield Health Village. It was recognised that innovative solutions were needed to improve the use of community hospital capacity more effectively and ensure alternative settings were available for those patients so that they would either:
 - Not require inpatient admission or
 - Could have a reduced length of rehabilitation services in a hospital setting.

The Lings Bar – Enhanced Community Care Service

8. It was decided, therefore, to pilot an innovative method of delivering care in Rushcliffe by selecting a group of Lings Bar patients, who were clinically judged to be stable enough to be managed at home through a combination of community health care and social care services.
9. The pilot explored how a group of patients were able to rehabilitate in their own homes and the potential advantages this would bring them in terms of:
 - Promoting independence
 - Increasing levels of patient satisfaction
 - Enabling people to return to their own homes as quickly as possible
 - Reducing length of hospital stays
 - Improving handovers between health and social care
 - Allowing hospital beds to be used by those in greatest need of them
 - Improving and involving the patients' family or immediate support in their rehabilitation.
10. The pilot focussed on patients who were rehabilitating at Lings Bar Hospital (a rehabilitation hospital with 72 beds situated in the Gamston area of Rushcliffe) and were registered with GPs within the Rushcliffe Clinical Commissioning Group (CCG) area. A number of these patients were selected to receive rehabilitation in their homes rather than remain in Lings Bar. A multi-disciplinary care plan was developed for these patients with a package of health, therapy and social care being provided in the patient's home for a maximum of 14 days within the pilot. The pilot commenced in October 2011 and the service continues.
11. The pilot was managed by a team made up of:
 - Clinical staff led by a Community Matron
 - Community Geriatrician
 - Social Care staff allocated to wards at Lings Bar
 - Community nursing and social care teams.

12. Managing the patients in this way has been referred to as a “virtual hospital”, where the hospital rehabilitation service is replicated in a person’s own home as *an alternative to a Lings Bar Hospital in-patient admission*.
13. Patients were entered onto the scheme catering for 5 patients at any one time, with a target duration not expected to exceed 14 days. During which time social care staff worked closely alongside health colleagues to ensure that smooth transitions of care were arranged for any patients requiring ongoing reablement services.
14. At the beginning of the pilot, the average length of stay on the hospital ward was 37 days. Following the pilot this was reduced to 21 days.
15. One of the objectives for the pilot was to conduct an evaluation including recommendations for future commissioning of health and care services.

Performance management and evaluation

16. Early evaluation of the pilot has included considerations of:

- Clinical criteria for admission into the pilot from acute or community hospitals
- Skill mix and capacity required to support patients in the home
- Support to the “virtual” Ward model/service users
- Appropriate length of stay in the pilot
- Impact on re-admissions to acute or community hospitals
- Impact on integration between health and social care
- Impact on patient satisfaction
- Impact on Delayed Transfer of Care
- Impact on demand for reablement services.

These areas were identified as requiring additional consideration alongside the qualitative impact upon the patient experience and the need to review the interface with intermediate care services.

Further evaluation will be conducted to provide a robust business case for rolling this scheme out into mainstream provision from April next year.

17. The pilot was evaluated to be an outstanding success, not only did it improve the experience of those people utilising the “virtual hospital” beds but it improved the operating practices between health and social care. It achieved this through:
 - Improved communications resulting from ward meetings
 - Allocated dedicated ward social care staff
 - Improved working relationships and improved understanding of the differing roles of health and social care staff.
18. Since October 2011, 128 patients have benefitted from personalised packages of care resulting in an earlier return to their home. The majority of patients being in the new service for less than 14 days.

19. The average length of stay for patients at Lings Bar was reduced from an average of 37 days to under 21 days. This showed that not only did patients benefit from receiving the 'virtual hospital' service at home it also reduce their length of stay on a hospital ward prior to discharge.
20. Additional funding has been requested from the winter pressures monies, this will enable us to extend the capacity of the Service in Rushcliffe from 5 places to 10 places as it has been identified that there is the demand to fill the places. Over the winter period, this will relieve pressure on the acute settings and enable more people to return to their own homes sooner.
21. In addition to which the people utilising the 'virtual hospital wards' spoke very highly about the service along with the staff. Whilst it was recognised that these patients were not able to compare the nature of the service to other existing care packages. They were aware that staff regularly visited and care was tailored to meet their needs.
22. As a result of the outstanding success of this pilot the decision was made to replicate this service by rolling it out to patients in Nottingham West and Nottingham North and East Clinical Commissioning Groups (CCG). This service has now been in place since July.
23. The evaluation of the pilot has been completed by the Collaboration for Leadership in Applied Health Research and Care (CLAHRC) in Nottinghamshire. This report together with provider and patient feedback will be used to inform future commissioning decisions regarding this work from April 2013.
24. The number of wards at Lings Bar Hospital was reduced from four to three, yet the increased efficiency with the level of admission activity for the hospital's three wards remains comparable to the previous number of admissions when the hospital had four wards in operation. This year it is forecast to increase the number of admissions.
25. Since the changes in how the social care teams works, there have been no delayed transfers of care for County patients for over twelve months.
26. Work has started to investigate whether an alternative, more appropriate care setting can be provided for medically stable non-weight bearing patients who currently stay at Lings Bar Hospital.

Next steps

27. The next steps are to:
 - work with Health in agreeing the future of the Enhanced Community Support Services which will be commissioned from April 2013.
 - ensure that a further service review is completed to ensure people are seen in the most appropriate setting at the appropriate time.
 - work in partnership with Health to develop an overarching strategy as to the future use of Lings Bar Hospital and the appropriate use of the facility for patients in the South of the County.

28. Further developments can be reported upon in October 2013.

Reason/s for Recommendation/s

29. The report is for information purposes only and therefore only for noting.

Statutory and Policy Implications

30. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) note the excellent progress made to date
- 2) Consider and comment on the information provided.

PAUL MCKAY

Service Director for Promoting Independence and Public Protection

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Constitutional Comments (NAB 07/12/2012)

31. The Adult Social Care and Health Committee has authority to note, consider and comment on the matters set out in this report by virtue of its terms of reference.

Financial Comments (NDR 06/12/2012)

32. There are no financial implications arising directly from this report.

Background Papers available for inspection

None.

Electoral Division(s) and Member(s) Affected

All.

ASCH83



7th January 2013

Agenda Item: 10

**REPORT OF THE CORPORATE DIRECTOR FOR ADULT SOCIAL CARE,
HEALTH AND PUBLIC PROTECTION**

**SECONDMENT OF COMPLIANCE MANAGER FROM THE CARE QUALITY
COMMISSION TO NOTTINGHAMSHIRE COUNTY COUNCIL**

Purpose of the Report

1. The purpose of the report is to seek approval from the Committee:
 - a. for a the secondment of a Compliance Manager from the Care Quality Commission (CQC) to the Adult Social Care, Health and Public Protection Department for a 12 month period.
 - b. for a Quality Development Officer to be seconded to the CQC to undertake the role of an Inspector for a period of 12 months.

Information

2. Further to the report to Council on 1st November 2012 on quality in care services, and the subsequent presentation to the Adult Social Care and Health Committee on 26th November 2012, the Corporate Director, Adult Social Care, Health and Public Protection has been in discussion with Vicki Wells the Regional Compliance Director from the CQC on measures to enhance the joint working in facilitating an effective care service and the monitoring and addressing of standards where necessary.
3. One of the measures that has been considered is the secondment of one of CQC's Compliance Managers to the Adult Social Care, Health and Public Protection Department for a 12 month period, to be based within the Joint Commissioning Unit to work under the Group Manager, Joint Commissioning, and alongside the Team Manager, Market Development and Care Standards Team.
4. The purpose of the secondment is to share knowledge and expertise about care standards and market development, with a specific focus on improving quality of care provided in a small number of care homes and home care agencies that have historically not been able to maintain high levels of good care provision. The Compliance Manager will be given the role of co-ordinating a programme of work which looks at how the relevant statutory agencies, including health partners, can work with the local providers to ensure a vibrant and sustainable social care market across Nottinghamshire.

5. It is proposed that the Compliance Manager would remain the employee of the CQC during the period of the secondment but that the post will be funded by the Council, using some uncommitted funding of NHS Support to Social Care Funding. Colleagues in the Health service have been consulted about the secondee spending some time with the Health service Quality Monitoring Service.
6. It is also proposed that, during this period, an opportunity is given to one of the Department's Quality Development Officers to be seconded to the local CQC office to undertake the role of an inspector. The QDO would be granted unpaid leave for the period of the secondment in accordance with the Council's policy to cover 'Temporary Employment with an External Employer' under Section D37 of the Personnel Handbook.
7. This opportunity will enable a better understanding of how the role of the Council's QDOs can complement the regulatory responsibilities of the CQC. The knowledge and experience gained by the QDO will be highly beneficial to the Department once the QDO returns to their substantive post at the end of the secondment.
8. The CQC would fund the salary of the QDO whilst they take on the role of inspector for the 12 month period but the Department will need to backfill the vacant QDO post to ensure their quality audit work is covered for the duration of their secondment.

Reason for Recommendations

9. The proposed secondment arrangements will:
 - a. Enable understanding the different roles of the Care Quality Commission, the Council and the Health service.
 - b. Enhance information sharing and co-ordinated action in dealing with risk.
 - c. Ensure effective coordination of inter-agency activity to facilitate quality in care services and effective risk assessment and risk management
 - d. Enable an exchange of skills, knowledge and understanding of staff in relation to the roles and responsibilities of each of the agencies.
 - e. Enable feedback to CQC of the issues for Council in carrying out our commissioning activities.
10. It is the intention that a report will be produced at the end of the period of the secondment of the outcomes arising from this partnership arrangement.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

12. The salary of the Compliance Manager, plus on-costs, will be £49,000 for a 12 month period. This cost will be met by the Department through the use of NHS Support to Social Care

Funding (Section 256). The Department already has an allocated budget within the Market Development Team to fund the backfill of the QDO post.

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- 1) approve the secondment of the Compliance Manager from the CQC to the Adult Social Care, Health and Public Protection Department for a 12 month period commencing on 14th January 2013 until 13th January 2014.
- 2) approve the use of departmental reserves to fund the salary and on-costs of the Compliance Manager for the 12 month secondment period
- 3) approve the secondment of one of the Department's Quality Development Officers for a 12 month period to the CQC to undertake the role of an Inspector.

DAVID PEARSON

Corporate Director for Adult Social Care, Health and Public Protection

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Constitutional Comments (KK 21/12/2012)

13. The proposals in this report are within the remit of the Adult Social Care and Health Committee.

Financial Comments (NDR 13/12/2012)

14. The financial implications are set out in paragraph 12 of the report.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

ASCH85

7th January 2013

Agenda Item: 11

REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND SUPPORT, OLDER ADULTS

CARE AND SUPPORT CENTRE INDEPENDENT LIVING ACCOMMODATION

Purpose of the Report

1. The purpose of the report is to approve the further development of independent living accommodation within the Woods Court Care and Support Centre, Newark as part of the Living at Home Programme.

Information and Advice

2. This report follows the report to the Adult Social Care and Health Committee in July 2012 which proposed alternative ways of using the Care and Support Centres to support older adults.
3. This report also follows the report to Full Council on the 22nd September 2011 where the Council agreed that the Council's remaining six homes would continue to operate as residential care homes as well as providing short-term and respite care services that will provide support to carers and that the existing Council Policy relating to non-closure of Care Homes would remain unchanged.
4. Each of the six Care and Support Centres are considering how they can develop more responsive and flexible ways of supporting older people and their carers to enable them to live in their own home environment.
5. Some of the new services developed are to be trialled and include a carers support service and a bathing service.
6. Community Link Assistants have also been identified at each home who will work with local communities, groups and individuals to profile local need and identify new ways of providing flexible services.
7. A proposal has been developed to create two Independent Living apartments at the Care and Support Centre, Woods Court, in Newark. Woods Court has been identified as there is sufficient space that is vacant because of the relocation of the Day Service and the apartments will be able to have separate access.
8. It is anticipated that if successful this type of service could be offered at other homes that are suitable where the need is identified.

9. Each apartment will be self-contained with its own front door and will include a bedroom, bathroom, lounge and kitchen area but will retain a physical link to the main Care and Support Centre.
10. The Independent Living apartments will provide transitional support to older people during their transfer from a hospital setting or will provide a period of intensive short-term care in the Care and Support Centre before returning to their own home.
11. The apartments will also be utilised as a facility for people where a short period of monitored care is required in order to prevent an admission into hospital or a residential care setting.
12. The Independent Living apartments will be supported by the use of existing Assistive Technology and, where appropriate, can also be used in the person's own home when they return.
13. The individuals will live independently from the Care and Support Centre, receiving the agreed level of care as outlined in the individual's care plan. They will also benefit from the reassurance afforded by living within the Care and Support Centre which they can visit or seek support from as required.
14. The Independent Living apartments will provide the opportunity for continued assessment and contact with the service user during the transitional period from a higher level of care to a reduced level of care as appropriate.
15. The Independent Living apartments can also be used to reassure carers that their relatives have reached a stage when they are able to return home thereby supporting the carer to continue caring for longer.
16. Criteria for eligibility to access the Independent Living apartments will be developed.
17. The aim of the Independent Living apartments is to divert older people from long-term residential care by assessing the risk and enabling them to have time to reach a level of independence enabling them to have the confidence to return home.

Statutory and Policy Implications

18. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

19. Following an initial desktop exercise the cost of the adaptations required is estimated to be in the region of £150,000. It is proposed that this is funded from slippage from the planned expenditure from the NHS Support to Social Care from Health (s256) funding. Once a final plan is agreed the detailed costings of the plans will be drawn up by external

providers utilising the existing Framework Agreements. The construction works will be delivered by the Council's own property services team.

Human Resources Implications

20. Staffing for the transitional units will be met by existing staff employed within the Care and Support Centre.

Implications for Sustainability and the Environment

21. All Health and Safety requirements will be met as part of Woods Court Care and Support Centre.

RECOMMENDATIONS

It is recommended that:

- 1) the development of the two Independent Living apartments at Woods Court, Newark be approved
- 2) the necessary Capital funding is met from slippage from the planned expenditure from the NHS Support to Social Care from Health (s256) funding
- 3) the apartments be evaluated after a six month period to assess their effectiveness as a model that could be used in other centres in the future.

DAVID HAMILTON

Service Director for Personal Care and Support – Older Adults

For any enquiries about this report please contact:

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Constitutional Comments (to go to Legal Service is necessary)

22. xxx

Financial Implications (NDR 20/12/2012)

23. The financial implications are set out in paragraph 19 of the report.

Background Papers

None.

Electoral Division(s) Affected

Newark East – Councillor Stuart Wallace.

ASCH84

7th January 2013

Agenda Item: 12

REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND SUPPORT(OLDER ADULTS)

LIVING AT HOME (FORMERLY AIMING FOR EXCELLENCE) – EXTRA CARE HOUSING UPDATE REPORT

Purpose of the Report

1. The purpose of this report is to update the Committee about the alternative approaches to the recent procurement to deliver an Extra Care Housing Scheme in the Mansfield and Ashfield districts.
2. To seek approval to continue the work currently being undertaken and subject to grant conditions being met make a submission to the Department of Health Specialist Housing Fund.

Information and Advice

3. Following the Committee meeting of 29th October 2012 officers were tasked to look at what other options are open to the Council in relation to provision in the area.
4. The successful recent procurement process saw contracts awarded to Keir Construction and Ashley House to deliver two Extra Care Housing schemes; one in Eastwood in the Broxtowe District and one in Retford in the Bassetlaw District. Officers were charged with looking at alternative options that would deliver an Extra Care Housing Scheme in the Mansfield/Ashfield area as the procurement did not award a contract for this site.

Background

5. The overall project is to develop a number of high quality Extra Care Housing schemes across Nottinghamshire that will become the focal point for delivering services to older people with more complex levels of need and that promote individual requirements for independence, wellbeing and dignity.

6. In total 160 places of extra care will be delivered by the project that the Council will have nomination rights to. The plans are for every District in the County to have Extra Care facilities. The nominated units will be a percentage of the overall scheme that the developer will build which will include a range of services and facilities that will be available not only for the people that live there but also for older people living in the wider community.
7. Following the recent procurement £8.524 million capital is available to the Council which is the balance of the £12.65m available in the capital programme following the successful procurement of a partner/partners that will deliver two extra care schemes; one in Eastwood and one in Retford. Members will recall that the contribution by the County Council would attract substantial inward investment of £80 - £100 million into the County.
8. Divided by the total number of nominated units to be achieved (105) this equates to an average subsidy of £81,000 per unit available to the Council to develop the outstanding units. The options considered in this report would be contained within this financial envelope.

Proposals for Ashfield/Mansfield

9. Since the Committee Meeting of 29th October 2012 officers have been investigating alternative options in respect of the provision of Extra Care for the Ashfield / Mansfield area. This has included revisiting the Local Plans with District Council colleagues to identify available sites. Two options are now under consideration:

Option 1:

10. Carry out a re-procurement exercise for the Skegby Lane site. This option would require the Council to review the criteria used in the recent tender as to test the market with the same specification is likely to result in the same outcome. In the recent Tender the proposal was that a proportion of the site would be made available for the developer. Discussions are now underway between the Council and both District Councils to look at the whole of the site being made available for general needs housing. Currently negotiations are taking place as a part of the Local Development Framework which is part of the planning process. Previously just a proportion of the site was highlighted for development as a specialist housing scheme.
11. If the whole site could be made available for development then a developer could provide general needs housing along with a specialist housing scheme which would potentially be financially more beneficial. The Council would also receive a greater capital receipt for the whole site. One downside to this approach would be the additional time constraints on gaining appropriate planning permissions for the whole of site.

Option 2:

12. Seek to identify alternative sites within the Mansfield and Ashfield districts and work closely with District Council colleagues to develop a joint approach to the provision of extra care.
13. **Mansfield:** Meetings have taken place with Mansfield District Council to explore the possibility of using an alternative site in the centre of Mansfield which is owned by Mansfield District Council. Negotiations are in an early stage but proposals would seek to utilise land owned by Mansfield District Council and submit a joint bid for additional funding through the Department of Health Care and Support Specialist Housing Fund. Officers have also had initial discussions with the local Clinical Commissioning Groups to explore them also being involved in the bid process by way of investing into the partnership. This fund is looking to award £300m across the country to suitable alternative housing schemes. A submission must be made by 18th January 2013 including full plans for the scheme and officers are currently working to achieve this.
14. The proposed site is just under 5 hectares and would take approximately 170 units of accommodation. The initial proposal is for a specialist housing scheme for people over the age of 55 years with NCC having approximately 20 - 25% of the total units for people with Extra Care needs and included within this would be a separate unit which would have accommodation for ten people with Dementia. It is proposed to utilise the specification for the original Design Brief for the Skegby Lane site in the recent procurement process to speed up the design process. The remainder of the units would be for people with low and moderate needs. Mansfield are developing a whole range of low level support services and these services would be available for the remainder of the tenants living at the scheme.
15. Nottinghamshire County Council could contribute a subsidy for our nominated units as we are doing with Kier for Lots 1 and 2 of the recent procurement exercise in Eastwood and Retford using the money in the Capital Programme which is the balance of the £12.65m. Progress would be accelerated as NCC and Mansfield District Council would enter into a partnering arrangement. This has been approved by our legal advisors and would avoid the need for a further procurement exercise.
16. In addition to this site officers are working with property colleagues to identify other alternative sites in the Ashfield / Mansfield area to stimulate similar schemes and/or alternative schemes. Members will be advised as soon as additional locations are identified.

Statutory and Policy Implications

17. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the

service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATIONS

It is recommended that:

- 1) Approval is given to continued work on options 1 and 2 described in this report.
- 2) subject to grant conditions being met a submission is made to the Department of Health for funding from the Department of Health Specialist Housing Fund by the 18th January 2013.

DAVID HAMILTON

Service Director for Personal Care and Support - Older Adults

For any enquiries about this report please contact:

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Constitutional Comments (LMc 17/12/2012)

52. The Adult Social Care and Health Committee has the delegated authority to approve the recommendations in the report.

Financial Implications (NDR 13/12/2012)

53. There are no financial implications arising directly from this report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- a) 10th April 2008 – Modernising Services for Older People in Nottinghamshire – County Council (published):

[http://dominoapps.nottsc.gov.uk/apps/pr/diary/memdiary.nsf/0/A04E3B8C7477E472802572CA0034B2E9/\\$file/09r_Modernising%20Services%20for%20Older%20People%20in%20Notts.pdf](http://dominoapps.nottsc.gov.uk/apps/pr/diary/memdiary.nsf/0/A04E3B8C7477E472802572CA0034B2E9/$file/09r_Modernising%20Services%20for%20Older%20People%20in%20Notts.pdf)

b) 14th July 2010 – Aiming For Excellence - Cabinet report (published):

[http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/26959B6CD01BFC578025761000320E95/\\$file/R10_aiming%20for%20excellence.pdf](http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/26959B6CD01BFC578025761000320E95/$file/R10_aiming%20for%20excellence.pdf)

c) 25th February 2010 – Aiming for Excellence - Council report (published):

[http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/\\$file/11_aiming%20for%20Excellence.pdf](http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/$file/11_aiming%20for%20Excellence.pdf)

[http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/\\$file/11_Aiming%20for%20Excellence%20App1.pdf](http://dominoapps.nottsc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/$file/11_Aiming%20for%20Excellence%20App1.pdf)

d) Equality Impact Assessment.

e) ITT documentation for Aiming for Excellence – Tender for Extra Care Housing.

Electoral Division(s) Affected

Mansfield:

Mansfield North – Councillors Joyce Bosnjak and Parry Tsimbiridis
Mansfield West – Councillors June Stendall and Victor Bobo
Mansfield South – Councillors Chris Winterton and Stephen Garner
Warsop – Councillor John Allin
Mansfield East – Councillors Bob Cross and Martin Wright.

Ashfield:

Hucknall – Councillors Mick Murphy, Rev Tom Irvine and Kevin Rostance
Kirkby in Ashfield North – Councillor John Knight
Kirkby in Ashfield South – Councillor Rachel Mdden
Selston – Councillor Gail Turner
Sutton in Ashfield East – Councillor Steven Carroll
Sutton in Ashfield West – Councillor Fiona Asbury
Sutton in Ashfield Centre – Councillor Michelle Gent
Sutton in Ashfield North – Councillor Jason Zadrozny.

ASCH88

7th January 2013**Agenda Item: 13****REPORT OF SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT
YOUNGER ADULTS****DAY SERVICES MODERNISATION PROGRAMME****Purpose of the Report**

1. The purpose of the report is to update the Committee on the day services modernisation programme and to seek approval to a variation to the date of the annual 2-week service closure period, an extension to a number of posts due to be disestablished in April 2013, and the commencement of a consultation on the transfer the day service catering staff to the Catering and Facilities Management service.

Information and Advice

2. Committee received a report in October 2012 outlining progress with the day services modernisation programme identifying works completed and further works to progress. Within this report Members agreed that further consideration should take place in respect to the day service catering functions with the support of the County Council Catering and Facilities management service, with a further report to Members to identify a recommended future direction for this service.
3. Since that report, further progress has been made toward the completion of the modernisation programme, and in particular there has been further building refurbishments completed on Moorlands in Bingham, Balderton in Newark and Sherwood and Worksop in Bassetlaw.
4. However, works remain to be completed on the Beeston day service site, the Ashfield day services site and the Ollerton site. It has now been identified that there are structural building issues causing delays to the Ashfield site and additional unanticipated works to the utilities provision in Ashfield and Ollerton which may incur additional cost and time to the programme. The cost of these works can be met from the contingency within the programme. However this will fully utilise remaining contingency funding. It is anticipated that the Ollerton and Beeston refurbishment will go beyond the current programme completion target with an expected delivery date of February 2013, whilst the Ashfield site building works should be completed by the end of January 2013, the utilities supply may not be fully installed until the spring of 2013.

5. The works to the Rushcliffe site will go beyond the programme date of April 2013 due to the building works to the school on the same site.
6. It was agreed by Full Council in June 2011 that the Council would commission and provide day services for 50 weeks per year (excepting Christmas and New Year), as part of the Day Service Modernisation Programme. Any additional needs of service users at these times were to be met through community care and respite budgets. The Christmas and New Year closure was chosen because day service attendance has always been lower during the festive period.
7. This proposal was implemented in 2012/13; Nottinghamshire County Council day services closed from Monday 23rd December 2012 and re-opened again on Monday 7th January 2013.
8. Having implemented this closure period during 2012/13, Committee are asked to agree that the closure period can change in future, from the Christmas and New Year period. It is requested that each District can set the closure period by local agreement.
9. It has been recognised that the most vulnerable and socially isolated people can find the Christmas and New Year period particularly problematic, both for physical and emotional reasons and due to cold weather. Day services provide a welcoming and warm environment, with freshly cooked food available and expert support available from staff who know people well and where Festive celebrations can be enjoyed in company with others. Day Services provide a Safeguarding function for all clients, so if someone does not attend as expected, staff will take steps to find out the reason and alert the community team if there is a problem.
10. To minimise problems due to isolation and service closure, Day Service staff spoke to clients and carers in October and November 2012, to ensure that people had sufficient notice of the planned closure to make other arrangements for support from informal carers. Where informal support was not going to be available, client details were passed on to the relevant assessment teams so that alternative service could be put in place. In total, people referred for additional support due to social isolation or vulnerability were:
 - 26 older people
 - 18 people with physical disabilities
 - 8 people with mental health issues.

Broxtowe day services also ran 3 sessions for any day service clients with mental health issues who wanted support during the period.

All clients have been advised of the Golden Number, in case of problems.

11. A consultation has been carried out by day service management, to find out when service users, families and staff would prefer day services to be closed for 2 weeks. The majority of service users, carers and staff prefer to have the closure during the summer, although there are differences between the different Districts. It is, therefore, recommended to members that the two week closure period should be agreed by local decision to meet the needs of the local service in consultation with the people who use the service and their carers.
12. As noted in the previous report to Members, the Day Service Modernisation Programme has resulted in a staff restructure within Nottinghamshire County Council day services. This was

approved by Delegated Authority (DDR No. AH/2012/00013) in February 2012. The first phase of the restructure resulted in there being 24 fte Day Service Leader posts from April 2012, which will reduce to 19 fte Day Service Leader posts from April 2013. A temporary Service Manager post was created to support the Group Manager during the period of the project; this post is due to cease in April 2013.

13. Committee are asked to approve that the number of Team Manager posts (Band D) is maintained at 5 fte from April 2013 and reduced to 3 fte posts from 1st October 2013, and that the temporary Service Manager post (Band E) is extended to 30th September 2013, to ensure that the day services are sufficiently settled and controlled before final management reduction takes place. This extra time is needed because the implementation of the day service refurbishment programme has taken longer than originally expected. The refurbishment works will still complete within the required timescale of April 2013 but in both the South and North localities, works are currently forecast to finish in late February 2013 (at the Beeston and Ollerton sites) and the services need between 3-6 months to move back into the new buildings and settle down into their new configuration. Policies and procedures (such as risk assessments) will need to be reviewed in the light of the changes and may need to be rewritten. Alongside the extension of the management posts the service would also require the extension of two business support posts which are due to end in April 2013 to maintained for a further six month period until 30th September 2013, to provide essential administration services to support the service as it settles into the new pattern of work.
14. It is further proposed that the Day Service Modernisation Project Manager post will be extended for a further twelve months to complete the overall project objectives including the market testing exercise agreed by Members to be deferred until the next financial year, continued work on transport and external service commissioning and any future procurement exercise requirements.
15. As agreed by Members in October 2012, discussions have taken place with the County Council Catering and Facilities management team to determine the best way to provide catering services within the day centres. The enabling of these staff into the new day service structure is currently planned for implementation by the end of March 2013.
16. Committee are now asked to approve a formal consultation on the transfer of the enabled day service catering staff, associated catering budgets and income lines from Day Services to Catering and Facilities, on a permanent basis. It is proposed that the transfer should take place in the new financial year following formal consultation with staff. This will enable the Catering and Facilities team to carry out a full review of day service catering, involving the staff fully in the process, in order to establish future operating practice and areas for greater service efficiency. This review will outline what changes are necessary to realise the saving from the catering service, required for the Day Service Modernisation programme. This transfer (should it be agreed) will also enable the catering staff to benefit from professional catering management oversight and controls into the future, and will ensure that the day service catering remodelling can be implemented in a consistent manner, based on best practice and the experience gained by Catering and Facilities from managing school catering and County Council catering venues. If the service review identifies that other efficiencies are possible, appropriate consultation will be carried out with the affected staff and unions.

Other Options Considered

17. As there is only minority support to continue with a Christmas and New Year closure, with the majority of people favouring local determination, therefore alternative options are not considered to be appropriate. All services will ensure that service users and carers are given full advance notice of any changes to service closure periods.
18. There is no alternative option proposed to provide sufficient management and administrative support to the Day Services over the April - September 2013 period, to ensure that services are sufficiently robust and settled before further management reduction.
19. The alternative options for reviewing and implementing the catering service remodelling are to a) put the current service out to tender and b) Catering and Facilities to provide an advisory role rather than taking on the management of the service. Option a) is not recommended at this point, since the advice from Procurement is that inefficiencies should be maximised and a clear service specification should be in place, before a service is tendered out. Both of these tasks need completing. Option b) is not recommended as the service considers that it will not be sufficient to ensure a consistency of practice across the centres and will require significant time from Day Service Team Managers, who currently manage the catering staff, to implement any recommended changes.

Reason/s for Recommendation/s

20. Members are asked to approve the recommendations to a) minimise the disruption and inconvenience to service users, carers and staff caused by the 2 week closure, b) to ensure the successful completion of the NCC day service refurbishment programme and c) to ensure the most efficient implementation of day service catering re-modelling.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Implications for Service Users

22. A change from closing for 2 weeks at Christmas and New Year will mean that the most vulnerable and socially isolated day service clients are not without a service at a difficult time of year, reliant on other temporary solutions for the support and service that they need to stay safe and well at home. The change will also relieve carers of additional caring responsibility during the festive period, if they want to continue to have a break from caring.
23. Continued management support during April to September 2013 will ensure that service users receive a robust and well-managed day service programme over the transition period, as they move back into improved day service facilities and the service settles down into the new configuration of buildings and other arrangements.

24. There will be a consistent quality expectation and standards developed for all catering provision in day services, which will benefit all service users. Improved provision may mean that more service users decide to buy food and drinks from the service.

Financial Implications

25. The total cost of the extensions to management posts is £78,000 (including on-costs). These costs can be met from the Day Service Modernisation Project fund (budget code 102193).

26. The total cost of extending the Business Support Assistant posts is £21,320 (including on-costs). These costs will be met from the Business Support North Budgets

27. The total cost of extending the Project Manager post and the Property Officer is £44,000. These costs can be met from the Day Service Modernisation Project fund (budget code 102193).

RECOMMENDATION/S

It is recommended that the Adult Social Care and Health Committee:

- a) authorise Day Services to set the period of the 2-week closure by local agreement with service users, carers and staff on an annual basis.
- b) approve the amendment of the day service staff restructure as follows:
 - i) 5 fte (185 hours) Team Managers, Pay Band D, scp 42-47 (£35,430 - £39,855 pro rata per annum) be extended from 1st April 2013 to 30th September 2013 and the post continue to be allocated approved car user status.
 - ii) 3 fte (111 hours) Team Managers, Pay Band D, scp 42-47 (£35,430 - £39,855 pro rata per annum) are in post from 1st October 2013 and the post continue to be allocated approved car user status.
 - iii) 2 fte (74 hours) temporary Business Support Assistant posts, Grade 3, scp 14-18 (£15,725 - £17,161 per annum pro rata) be extended from 1st April 2013 to 30th September 2013.
 - iv) 1 fte (37 hours) temporary Service Manager (Day Services), Pay Band E, scp 47-52 (£39,855 - £44,276 per annum pro rata) be extended from 1st April 2013 to 30th September 2013 and the post continue to be allocated approved car user status.
- c) The following temporary posts in Business Change be extended as follows:
 - i) 1 fte (37 hours) temporary Project Manager, Pay Band E, scp 47-52 (£39,855 - £44,276 per annum) be extended from 1st August 2013 until 31st August 2014 and the post continue to be allocated approved car user status
- d) Approve the consultation on the transfer of all day service catering staff and associated catering budgets to the Catering and Facilities Team.

JON WILSON

Service Director, Personal Care and Support, Younger Adults

For any enquiries about this report please contact:

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Constitutional Comments (LMc 17/12/2012)

28. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (TMR 13/12/2012)

29. The financial implications are as contained in the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- a. [Day Services Modernisation Report to Full County Council](#) – 30th June 2011.
- b. Delegated Decision No. AH/2012/00013 Changes to Day Services Staffing Establishments.

Electoral Division(s) and Member(s) Affected

All.

ASCH86

7th January 2013

Agenda Item: 14

REPORT OF THE SERVICE DIRECTOR, PERSONAL CARE AND SUPPORT (YOUNGER ADULTS)

COMMISSIONING OF SIGN LANGUAGE INTERPRETATION SERVICE FOR NOTTINGHAMSHIRE COUNTY COUNCIL

Purpose of the Report

1. The purpose of the report is to seek approval to procure a new contract for the Nottinghamshire Sign Language Interpretation Service (SLIS) by competitive tender. The current contract has expired and partner agencies are keen to work together to procure a cost effective service. Nottingham City Council are taking a lead commissioner role in tendering for this service which includes both NHS Nottinghamshire County and NHS Nottingham City and have invited the County Council to be part of this procurement process.

Information and Advice

Current contract and service

2. Nottinghamshire County Council's current Sign Language Interpretation Service is provided by Nottinghamshire Deaf Society (NDS). Service Level Agreements have been in place with the NDS for two decades, covering the provision of an accessible community-based sign language interpretation service for the deaf community of Nottinghamshire. Currently NDS has separate Service Level Agreements in place for SLIS with Nottingham City Council, NHS Nottinghamshire and NHS Nottingham City. NHS Bassetlaw spot purchase services from NDS as required.
3. The current contract provides an interpretation service that enables people from the deaf community to have equitable access to information, advice, and social care services, as well as low level universal and prevention services provided by the council, community and voluntary sector.
4. The service offers both planned and drop-in services including a SLIS to enable access to the County Council's Customer Service Centre. Contacts and communication may relate to any area of County Council services. The SLIS supports adults who are deaf and require a social care assessment to ensure they can participate in this process and are involved in making choices and informed decisions about the services they need whether via a personal budget or universal services.

5. This service is also available to deaf parents who need access to a sign language service to effectively engage in their child's education, such as parent evenings and consultations. It also offers deaf children a sign language service independently to ensure they can effectively access social care services provided by Children Families and Cultural Services.
6. The current County Council contract provides a total of 2,836 face-to-face hours per annum (including administration, travel and running costs). This service can be provided on a planned basis, or is available on an out of hours emergency basis for 46 hours of the week:
 - 6.00 pm – 11.00 pm weekdays
 - 9.00 am – 11.00 pm Saturdays
 - 9.00 am – 4.00 pm Sundays.

This would equate to availability out of hours for 2,392 hours per annum if required. Of the total volume of 2,836 face-to-face hours provided:

- 1,900 hours are available Monday to Friday
- 936 hours are available at weekends.

In 2011/12 this included 250 duty contacts to provide telephone, and correspondence interpretation services.

Budget

7. The value of the current County Council contract is £48,879 per annum. Within the current contract, NDS meets sign language interpretation requests from the County Council on a countywide basis including travelling to wherever it is needed.
8. Nottingham City Council is proposing to take a lead commissioner role and has started a process to tender for a SLIS in partnership with NHS Nottinghamshire and NHS Nottingham City Health. Nottinghamshire County Council has also been invited to join this tender, to engage in shaping the service specification, defining the outcomes and future market. The proposed time-scale is to have the new contract and revised service in place by 1st June 2013.
9. From the available information the number of people registered as deaf (184) and those registered as hard of hearing (327) are much greater than the number of individuals accessing the SLIS. During the life of the new contract it will be possible to negotiate some changes at the annual contract review to reflect any changing needs of the deaf community that may subsequently emerge. The new contract will be delivered at the same or reduced cost as we now pay. Sign language interpretation when required as part of social care responsibilities under the Deprivation of Liberty requirements and for people using Direct Payment Support Services is not part of the existing agreement, we currently pay extra on top of the £48,879 contract value for these. These will be included as standard in the new contract, which will achieve some savings.
10. In line with procurement legislation and advice from the County Council Procurement team there is a need to test the market and competitively tender the SLIS. This will provide an opportunity for NDS and other providers in the market to compete for the work.

Mapping demand for a Sign Language Interpretation Service

11. The services provided for children and schools need detailed evaluation during the first year of the contract. Coordinating such a small service across the schools in the County during a period of considerable change in the governance of schools has resulted in little formal monitoring of the quality of these services. The consultation undertaken suggests a high value is placed on these services. However, this will require more detailed confirmation. SLIS and lip reading is provided by many other sources such as schools, colleges, the NHS, as well as groups, organisations, families and individuals.
12. Whilst the demand for SLIS within children's services has declined in recent years, there has been an increased demand from deaf adults. Estimating the future impact of health care advances such as cochlea implants will be key to understanding the number of people needing a SLIS in the future.
13. The need for the service is changing and will continue to change in the coming years. The proposed contract will be offered for three years but will be subject to annual review and possible changes each year to ensure the SLIS meets local changing demand.
14. NDS also receives separate funding from Councils to deliver other services that provide support. Currently an annual average of £31,000 is paid in grant aid. It is split equally between providing social support for the deaf and hard of hearing older people; and providing general financial aid, including provision of premises, related costs; and staff to provide the service as well as training which includes lip reading and deaf awareness. This provides preventative services for people who are not eligible for social care, such as befriending, lunch clubs, men's and women's groups.
15. Their training increases the capacity of many other organisations, services, families and individuals who provide vital communication to support those who are deaf or hard of hearing. These services are separate to the SLIS and therefore should remain viable in the event of a different provider being awarded the tender.

Other options considered

16. Cease to fund at the end of the extended contract period: A statutory duty is placed upon the Council to communicate effectively with deaf citizens through providing interpretation services. Interpretation services could be individually spot purchased but this would incur significant transactional costs and would impede access for deaf citizens.
17. Tender the service solely as Nottinghamshire County Council and do not undertake a joint process: The economies of scale that present themselves through a joint procurement process are favourable to the Council to achieve best value and also to the successful applicant as the higher contract value leads to a more sustainable service than smaller value contracts delivering the same service. A separate service would also fail to deliver an integrated service for the deaf citizen and would lead to unnecessary duplication.
18. Deliver the service as part of the Corporate Communications Service: This option was explored by the City Council and discussed with their Language Solutions team. As well as the issues raised within Option 2, given the face-to-face requirements of deaf citizens in accessing provision, there are significant difficulties in this service providing an accessible route for deaf citizens.

19. Deliver the service via individuals Personal Budgets where eligible: This option requires individual service users to purchase a SLIS directly from providers or via Adult Social Services. This form of spot purchasing fails to deliver the cost benefits available from a volume contract. There would be no cap on spending in the same way as a volume contract provides.

Preferred Option

20. Tender the Interpretation Services for the deaf community through a joint commissioning process with Nottingham City Council, Nottingham City NHS and Nottinghamshire County NHS. This will ensure a fair and transparent process is undertaken, and will allow best value to be sought across all Interpretation Services for the deaf community due to the economies of scale presented by joint commissioning.

Implications for Service Users

21. The preferred option will ensure the Council obtains best value for the budget and mitigates possible increases for three years. Recently commissioned Advocacy Services already provide evidence of the benefits of commissioning partnerships where specialist services are required. The provision of an integrated service across health and local authority services will provide the best customer experience ensuring care pathways are supported by SLIS over time.
22. The outcomes of local consultation across the whole County strongly suggest spot purchasing can result in interpreters being used from outside the County area. There is national evidence that sign language interpreters include local dialect in the same way as the spoken language, therefore, interpreters from outside the local area are less effective. The consultation strongly suggested that local people using a local pool of interpreters have greater trust in them than one delivered by spot purchasing.
23. Deaf people who may be eligible for social care require access to a SLIS to ensure that social care outcomes are appropriately achieved. This new contract will ensure that service users are fully involved in the choice and control of their social care services; this will include assessment, support planning, brokerage and use of Direct Payments where appropriate.
24. The proposed suite of services promotes access to a quality service to meet the required standards where it is indicated the Council have a duty to provide it.
25. The provision of a SLIS promotes early intervention and prevention reducing the risk of avoidable long term social care or admission to residential care and hospital
26. The provision of a SLIS promotes independence, dignity and community engagement and reduces stigma, social exclusion and hate crime.

Statutory and Policy Implications

27. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Equalities Implications

28. Nottinghamshire County Council has a statutory obligation under the Equality Act 2010 to ensure that 'reasonable adjustments' are made to enable deaf people to use their services. Tendering the Interpretation services for the deaf community through a joint commissioning process will allow for the economies of scale to be favourable to the Council, its partners and also to the successful applicant. It will also provide an integrated service for deaf adults and their families.
29. The SLIS enables the Council to meet its statutory responsibilities under the Disability Discrimination Act 2005 to ensure services are accessible to people from the deaf community, in line with the Equality Act 2010.

RECOMMENDATIONS

It is recommended that:

- a) Members approve the procurement of a new contract for a Sign Language Interpretation Service by competitive tender in partnership with Nottingham City Council and NHS Nottinghamshire County and NHS Nottingham City.

JON WILSON

Service Director, Personal Care and Support (Younger Adults)

For any enquiries about this report please contact:

Nigel Walker

Commissioning Officer (Joint Commissioning Unit)

Tel: (0115) 97 74016

Email: nigel.walker@nottsc.gov.uk

Constitutional Comments (NAB 14/12/2012)

30. The Adult Social Care and Health Committee has authority to consider and approve the recommendation set out in this report by virtue of its terms of reference.

Financial Comments (NDR 13/12/2012)

31. The financial implications are set out in paragraphs 7 to 10 of the report.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

ASCH87

7th January 2013

Agenda Item: 15

REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

EXTENSION OF CONTRACT FOR SUPPORT WITH SECTOR LED IMPROVEMENT IN ADULT SOCIAL CARE

Purpose of the Report

1. The purpose of the report is to request an extension to the temporary post of Programme Director, Sector Led Reform, until the end of March 2013.

Information and Advice

2. Members will recall that Nottinghamshire County Council hosts the regional Joint Improvement Programme for adult social care in the East Midlands, with funding from the Department of Health. In addition to this work, in May 2012 a temporary Programme Director post was established to provide strategic support with health and local government transitions and to develop and implement a system of sector-led improvement for adult social care across the region. The corporate director has also overseen this work on behalf of the East Midlands Council.
3. At the Committee meeting in September 2012 a report was submitted requesting the extension of this regional post for 3 months until the end of December 2012, and the recommendation was accepted.
4. As a result of the work undertaken by the regional post there has been a broad consensus around the proposed approach to be taken to sector-led improvement, agreed by statutory Directors of Adult Social Care, Chief Executives and Cabinet Members/Committee Chairs of Adult Social Care across the East Midlands. The approval will be similar to that used in children's services as this is well established and seen nationally as a model of good practice. The core elements to this approach are:
 - self-assessment
 - peer challenges (conducted by a small review team comprising an Adult Social Care Director from another local authority, Assistant Directors or equivalent and an elected Member)
 - peer challenges to be focused, robust and independent (external to Council)
 - peer challenges annual summit
 - potential for leadership development
 - agreed core data set to assist benchmarking

- shared learning approaches
- develop a community of practice.

5. The intention is that there will be 2 pilot peer challenges in March/April 2013.
6. There is still work to do to support the embedding of the sector-led improvement programme. Additional business support to administer and co-ordinate key elements of the programme needs to be commissioned from SDSA, which provides support for the Children's Sector Led Improvement programme. In addition there is a need to ensure senior adult social care expertise to work with SDSA, lead on the completion of the self assessment guidance and provide analysis of the completed self assessments and facilitation of the annual challenge and improvement event. Support is also required to oversee the preparation for and co-ordination of the pilot reviews and the learning arising from these.
7. There is ongoing liaison with the Local Government Association and there will be a need to organise the second programme of peer review training for Directors, Assistant Directors (or equivalent) and Elected Members.
8. The objective is to reach a point as soon as possible where the sector led improvement programme can be sustained without the need for Programme Director input. It is anticipated that input will be required to achieve the work identified in the report over the next few months but that the level of resource can be reduced to a maximum of 2 days per week.

Other Options Considered

9. This is essential cross-regional development work, which has been needed to put local authorities in a strong position to deal with the required national changes. The senior management capacity did not exist within the East Midlands Local Authorities for this work hence the need to pool resources for a regional approach.

Reason/s for Recommendation/s

10. The Health and Social Care Bill and sector-led reform represent some of the most significant changes to public services in the last fifty years. The work undertaken by this regional post is essential in order to assist with the successful implementation of the change across the East Midlands.

Statutory and Policy Implications

11. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

12. The funding for this post is split between the East Midlands Joint Improvement Programme and the Strategic Health Authority, so it is all external funding. Additional funding of £90,000 has now been made available to continue to fund this work into early 2013.

Human Resources Implications

13. It is proposed that Nottinghamshire County Council continues to host the post, and that the Deputy Chief Executive and Corporate Director, Adult Social Care, Health and Public Protection provides oversight of the work of the post-holder.

RECOMMENDATION/S

1) It is recommended that the post of the temporary Programme Director, Sector-led Reform be extended on the basis of 2 days per week or equivalent until 31st March 2013.

DAVID PEARSON

Corporate Director, Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

Jennie Kennington

Senior Executive Officer

Email: jennie.kennington@nottscc.gov.uk

Constitutional Comments (LMc 18/12/2012)

14. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

Financial Comments (NDR 20/12/2012)

15. The financial implications are set out in paragraph 11 of the report.

Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Report on the extension of the Programme Director, Sector Led Reform post, 3rd Sept 2012](#)

Electoral Division(s) and Member(s) Affected

All.

ASCH89

7 January 2013

Agenda Item: 16

REPORT OF CORPORATE DIRECTOR, POLICY, PLANNING AND CORPORATE SERVICES

WORK PROGRAMME

Purpose of the Report

1. To consider the Committee's work programme for 2012/13.

Information and Advice

2. The County Council requires each committee to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the committee's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and committee meeting. Any member of the committee is able to suggest items for possible inclusion.
3. The attached work programme has been drafted in consultation with the Chairman and Vice-Chairman, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.
4. As part of the transparency introduced by the new committee arrangements, committees are expected to review day to day operational decisions made by officers using their delegated powers. It is anticipated that the committee will wish to commission periodic reports on such decisions. The committee is therefore requested to identify activities on which it would like to receive reports for inclusion in the work programme. It may be that the presentations about activities in the committee's remit will help to inform this.
5. The work programme already includes a number of reports on items suggested by the committee.

Other Options Considered

6. None.

Reason/s for Recommendation/s

7. To assist the committee in preparing its work programme.

Statutory and Policy Implications

8. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) That the committee's work programme be noted, and consideration be given to any changes which the committee wishes to make.

Jayne Francis-Ward
Corporate Director, Policy, Planning and Corporate Services

For any enquiries about this report please contact: Paul Davies, x 73299

Constitutional Comments (HD)

1. The Committee has authority to consider the matters set out in this report by virtue of its terms of reference.

Financial Comments (PS)

2. There are no direct financial implications arising from the contents of this report. Any future reports to Committee on operational activities and officer working groups, will contain relevant financial information and comments.

Background Papers

None.

Electoral Division(s) and Member(s) Affected

All

ADULT SOCIAL CARE & HEALTH COMMITTEE - WORK PROGRAMME

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
4 February 2013			
Progress update on ASCH high governance projects	Update on biggest projects currently in progress within ASCH	Relevant Service Directors	
New rates for independent sector care homes, homecare and other community based support services and new charges for services	Review of contract prices and charges to service users – for decision	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
Deprivation of Liberty Safeguards (DoLS), Best Interests Assessments (BIA) and new responsibilities for local authorities.	An overview of the department's responsibilities in relation to DoLS and BIA, and the new responsibilities passing to local authorities from April 2013 for assessments and authorisations in hospitals.	Service Director – Joint Commissioning, Quality and Business Change	Claire Bearder/Carol Evans
Reablement for Younger Adults	Update on the Reablement services being provided to younger adults.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
Overview of Adult Social Care and Health savings and Efficiencies Programme	Update on progress of projects in dept and savings made to date.	Service Director – Joint Commissioning, Quality and Business Change	Kate Revell
Transfer of Independent Living Fund (ILF)	To provide an update on the proposed transfer of ILF funding – for people with disabilities under 65 - to local authorities.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
Dignity in Care	To provide an update on the current work around Dignity in Care	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
Future Fee Levels for older Person Care Homes	To approve the level of funding.	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
National Policy Developments in the Monitoring and Regulation of Care Services	To provide an overview of the National Policy.	David Pearson, Corporate Director, for Adult Social Care, Health and Public Protection	Jennie Kennington
Extension of Community Access Worker posts	To provide an overview of the roles and responsibilities of Community Access Workers and request extension of posts	Service Director for Personal Care and Support – Younger Adults	
4 March 2013			
Progress update on 2 of ASCH high governance projects	Update on biggest projects currently in progress within ASCH (Alternatives to residential care – including extra care developments)	Relevant Service Directors	
Proposals for redesign of community based services	Update on redesign of community based care services.	Service Director – Joint Commissioning, Quality and Business Change	Kate Revell
Personalisation and Promoting Independence – progress report	To provide an update on progress on personalisation and promoting independence.	Service Director for Promoting Independence and Public Protection	Jane North/ Nicola Peace
Update on homeless prevention services	Overview and update on services provided to people who are homeless.	Service Director – Joint Commissioning, Quality and Business Change	Beth Cundy
Progress update on Day Services Modernisation Programme	To provide an update on the progress made to date with the modernisation of day services.	Service Director for Personal Care and Support – Younger Adults	Wendy Lippmann
Electronic Roster and Monitoring System	To seek approval for funding for an Electronic Roster and Monitoring System	Service Director for Promoting Independence and Public Protection	Karen Peters/ Nicola Peace
Young Carers Strategy	To present the Young Carers Strategy	Service Director for Personal Care and Support – Younger Adults	Sue Foster
Nottinghamshire County Council's Response to Equalities and Human Rights Commission Survey	To report back on the response to the survey	David Pearson, Corporate Director, for Adult Social Care, Health and Public Protection	Jennie Kennington

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
on Older People's Home Care and Human Rights			
25th March 2013			
Contract Extension for HPAS	To seek approval to extend the contract for the HPAS Service	Service Director – Joint Commissioning, Quality and Business Change	Jane Cashmore / Jane Zdanowska
22nd April 2013			
Update on ASCH performance	Overview of current performance in ASC including key performance indicators, and including review of quality dashboard.	Service Director – Joint Commissioning, Quality and Business Change	Anne Morgan
Think Local, Act Personal – Expenditure Plan for 2013/14	To seek approval for of the Think Local, Act Personal expenditure plan for 2013/14	Service Director for Promoting Independence and Public Protection	Jane North
Services to Support Young People in Transitions - Update	Update on the work taking place on the transition from Children's to Adult Services.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
May 2013			
June 2013			
Project to develop the Nottinghamshire partnership for social care workforce development training function to shape the independent social care workforce	Update on progress of the Social Care Workforce Development	Service Director for Personal Care and Support – Older Adults	Anita Astle/Richard Burke
Supporting People Deaf Floating Support Service Commissioning Update	To provide an update on progress made with commissioning the deaf floating support service	Service Director – Joint Commissioning, Quality and Business Change	Beth Cundy

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
July 2013			
September 2013			
Update on the progress of assistive technology use in maintaining the independence of vulnerable people	Update on the progress on the Assistive Technology (see report of the 29 th October 2012)	Service Director for Personal Care and Support – Older Adults	Mark Douglas
October 2012			
NHS Support for Social Care	To report back to Members as stated in the report on the 29 th October 2012	Service Director for Personal Care and Support – Older Adults	Jane Cashmore

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