

Adult Social Care and Health Committee

Date: Monday, 26 November 2012
Time: 10:30
Venue: County Hall
Address: County Hall, West Bridgford, Nottingham NG2 7QP

AGENDA

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3	<u>Declarations of Interests by Members and Officers:- (see note below)</u> (a) Disclosable Pecuniary Interests (b) Private Interests (pecuniary and non-pecuniary)	1-2
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5	<u>Presentation on Quality in Care Services</u> Details	11 - 24
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7	<u>Overview of Adult Social Care and Health Saving and Efficiencies Programme</u> Details	29 - 34
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10	<u>Revised Staffing Structure for County Enterprise Foods amended</u> Details	53 - 60
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minutes

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 29 October 2012 (commencing at 10.30 am)

Membership

Persons absent are marked with 'A'

COUNCILLORS

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

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

OTHER COUNCILLORS IN ATTENDANCE

Councillor Vincent Dobson
Councillor Mel Shepherd

OFFICERS IN ATTENDANCE

Caroline Baria, Service Director, Joint Commissioning, Quality and Business Change
Paul Davies, Democratic Services Officer
Claire Dixon, Liberal Democrat Group Administration/Research Officer
David Hamilton, Service Director, Personal Care and Support (Older Adults)
Jennie Kennington, Senior Executive Officer
Robert Knott, Group Manager, Credit Control and Payments
Paul McKay, Service Director, Promoting Independence and Public Protection
David Pearson, Corporate Director, Adult Social Care, Health and Public Protection
Anna Vincent, Independent Group Administration/Research Officer
Michelle Welsh, Labour Group Research Officer
Jon Wilson, Service Director, Personal Care and Support for Younger Adults

MEMBERSHIP

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

APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Madden and Zadrozny (both on other County Council business).

DECLARATIONS OF INTEREST

There were no declarations of interest.

OVERVIEW OF PERSONAL CARE AND SUPPORT FOR OLDER ADULTS

RESOLVED: 2012/046

That the report be noted.

WELFARE REFORM ACT 2012: IMPLEMENTING THE SOCIAL CARE FUND IN NOTTINGHAMSHIRE

The Chairman moved a revised recommendation, which was agreed.

RESOLVED: 2012/047

- (1) That the report and the changes to the Social Fund be noted.
- (2) That a further report recommending revised eligibility criteria for the Social Fund and options in relation to administration of the Fund be brought to the Policy Committee.

AIMING FOR EXCELLENCE: EXTRA CARE HOUSING UPDATE

RESOLVED: 2012/048

- (1) That subject to the requirements of the Public Contracts Regulations 2006 in relation to the process of award, and completion of the contractual documents in the form supplied by the Council to bidders during the invitation to tender process that the award of contract for Lot 1 (Eastwood) be approved;
- (2) That subject to the requirements of the Public Contracts Regulations 2006 in relation to the process of award, and completion of the contractual documents in the form supplied by the Council to bidders during the invitation to tender process that the award of contract for Lot 2 (Retford) be approved;
- (3) That no award be made in relation to Lot 3 (Mansfield/Ashfield); and

- (4) That officers be tasked to look at what other options are open to the Council in relation to provision in the Mansfield/Ashfield area and report back to Committee by 7 January 2013.

DAY SERVICES MODERNISATION PROGRAMME: UPDATE

RESOLVED: 2012/049

- (1) That the progress of the Day Service Modernisation Programme to date be noted.
- (2) That the procedure for Day Services Asset Use set out in Appendix 2 to the report be supported.
- (3) That approval be given to the strategic direction for catering provision and the delivery of a report to members identifying how best to realign the service as set out in paragraphs 10-16 of the report.
- (4) That implementation of market testing and outsourcing for some Council-run day service provision be deferred until 2013/14, as set out in paragraph 22 of the report.

ADULT SOCIAL CARE MARKET POSITION STATEMENT

RESOLVED: 2012/050

- (1) That final version of Nottinghamshire' Market Position Statement be approved.
- (2) That the future work planned with providers to develop the local market be noted.

LEARNING DISABILITY AND MENTAL HEALTH COMMUNITY CARE EFFICIENCY PROJECT

RESOLVED: 2012/051

That the report be noted.

NHS SUPPORT FOR SOCIAL CARE FUNDING

RESOLVED: 2012/052

- (1) That the following funding requests are approved from s.256 funding for 2012-13 and that funding be carried forward for requests that extend beyond 31 March 2013:
- (a) Mental Health Intermediate Care Service (MHICS) - **£214,000**
- i. 1 fte (37 hours) temporary Social Worker, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be extended until the 30 September 2013, be based in the Broxtowe MHICS team and the post be allocated approved car user status.

- ii. 3.5 fte (129.5 hours) temporary Social Workers, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be established for 12 months with effect from the date of appointment, be based in Bassetlaw, Gedling and Mansfield/Ashfield and the posts be allocated approved car user status.
- (b) Dementia Intensive Care Unit (DICU) - **£45,000**
- (c) Social Care Support to Memory Assessment Services (MAS) - **£72,000**
- (d) Home Care In-reach Pilot for People with Dementia in Hospital - **£10,000**
- (e) Short Term Assessment, Recuperation and Reablement beds (STARR service):

Non-weight bearing fracture beds - **£200,000**
 Assessment Beds - **£400,400**

To extend the following temporary posts until 30 September 2013:

- i. 3 fte (111 hours) Social Workers, Pay Band A/B, scp 29-39 (£24,646 - £32,800) to cover Broxtowe, Gedling, Rushcliffe, Newark, Mansfield and Ashfield and the posts to carry approved car user status.
- ii. 0.5 fte (18.5 hours) Team Manager, Pay Band D, scp 42-47 and the post be allocated car user status in Bassetlaw.
- iii. 0.5 fte (18.5 hours) Community Care Officer, Grade 5, scp 24-28 in Bassetlaw and the posts to carry approved car user status.

and establish the following temporary posts for 12 months from date of appointment to support an additional 5 assessment beds across Broxtowe, Gedling and Rushcliffe, 5 assessment beds in Mansfield and Ashfield, and additional beds in Newark and Sherwood:

- iv. 0.5 fte (18.5 hours) Social Worker, Pay Band A/B, scp 29-39 (£24,646 - £32,800) to cover Broxtowe, Gedling, Rushcliffe and the posts to carry approved car user status.
- v. 1 fte (37 hours) Occupational Therapist, Pay Band A/B, scp 29-39 (£24,646 - £32,800) to cover Broxtowe, Gedling, Rushcliffe and the posts to carry approved car user status.
- vi. 1 fte (37 hours) Occupational Therapist, Pay Band A/B, scp 29-39 (£24,646 - £32,800) to cover Mansfield and Ashfield and the post to carry approved car user status.
- vii. 1 fte (37 hours) Occupational Therapist, Pay Band A/B, scp 29-39 (£24,646 - £32,800) to cover Bassetlaw, Newark and Sherwood and the post to carry approved car user status.
- (f) Services to improve Hospital Discharge arrangements:

Nottingham University Hospitals (NUH) £368,965

- i. 2 fte (74 hours) temporary Social Workers, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be extended until 31st March 2013 to cover Broxtowe, Gedling, Rushcliffe, and the posts to carry approved car user status.
- ii. 2.2 fte (81.4 hours) temporary Service Advisors, Grade 4, scp 19-23 (£17,802 - £20,198) be established for a period of 12 months from date of appointment to cover Broxtowe, Gedling, Rushcliffe.
- iii. 1 fte (37 hours) temporary Community Care Officers, Grade 5, scp 24-28 (£20,858 - £23,708) be established for a period of 12 months from date of appointment to cover Broxtowe, Gedling, Rushcliffe, and the posts to carry approved car user status.
- iv. Funding is approved to provide additional cover for weekends and winter pressures.
- v. 1 fte (37 hours) temporary Social Worker (Younger Adult with Physical Disabilities), Pay Band A/B, scp 29-39 (£24,646 - £32,800) be established for 12 months from the date of appointment to cover Broxtowe, Gedling, Rushcliffe, and the post to carry approved car user status.
- vi. 1 fte (37 hours) temporary Social Worker, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be established for a period of 12 months with effect from date of appointment to work within any new project team created through the Frail Elderly programme of 'Productive Notts'.
- vii. A temporary rapid response homecare service to provide interim home care services to people in hospital awaiting discharge due to a delay in the start of their regular homecare services. This service has initially been commissioned until April 2013. However there may be a need to extend it beyond April 2013. Funding is approved for 12 months.

Sherwood Forest Hospital Trust (SFHT) £185,600

- viii. 2 fte (74 hours) temporary Social Workers, Pay Band A/B, SCP 29-39 (£24,646 - £32,800) be established for a period of 12 months with effect from date of appointment to work within a new project team created through the Frail Elderly and Enhanced Delayed Transfers of Care programmes at Kings Mill Hospital. The posts to carry approved car user status.
- ix. Social care support to admission avoidance services operating across all SFHT hospital sites. Funding is approved to extend some rapid response services based in the Accident and Emergency centre at Kings Mill Hospital for a period of 12 months.

Bassetlaw Hospitals Trust £257,835

- x. 1 fte (37 hours) temporary Social Worker, Pay Band A/B, SCP 29-39 (£24,646 - £32,800) be established for a period of 12 months with effect from date of appointment to work within the new Assessment and Treatment Centre team at Bassetlaw Hospital. The post to carry approved car user status.
- xi. 1.5 fte (55.5) temporary Community Care Officers, Grade 5, scp 24-28 (£20,858 - £23,708) to established for 12 months with effect from the date of appointment to cover Bassetlaw and the posts to carry approved car user status.
- xii. 1 fte (37 hours) temporary Social Worker, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be extended to continue to work as a specialist End of Life Social Worker with the Macmillan Service.

This post is a joint funded temporary post with the Macmillan Charity; the post was agreed for 6 years with Macmillan funding for the first 3 years and Nottinghamshire County Council funding for the following 3 years. This request is for 3 years of funding; part year 2012-13, full year 2013-14 and 2014-15, part year 2015-16. The post will carry approved car user status.

- xiii. A temporary rapid response homecare service to support people being discharged from Bassetlaw Hospital has been commissioned. Funding is approved for 12 months.

(g) **START Transformation - £428,400 Section 256 / £150,000 Reablement**

- i. 1 fte (37 hours) temporary Senior Practitioner post, Pay Band C SCP 39-44, (£32,800 - £37,206) be extended until 30 September 2013 and the post to carry approved car user status. £48,500
- ii. 1 fte (37 hours) temporary Commissioning Officer post, Pay Band C SCP 39-44 (£32,800 - £37,206) be extended until 30 September 2013 and the post to carry approved car user status. £48,500
- iii. 11 fte (407 hours) temporary Social Workers / Occupational Therapists Pay Band A/B, SCP 29-39 (£24,646 - £32,800) be established for a period of 12 months with effect from the date of appointment and the posts to carry approved car user status. £470,800
- iv. the remaining £10,600 will be used for training, equipment etc.

(h) **Community Equipment and Occupational Therapy Services:**

ICES additional equipment - **£200,000**

ICES weekend access - **£20,000**

Additional OTs x 6 - **£834,600**

Temporary OT Post for specialist assessments - **£42,800**

Agency Occupational Therapy provision - **£120,000**

- i.1 fte (37 hours) Occupational Therapist (seating assessments), Pay Band A/B, SCP 29-39 (£24,646 - £32,800) be established for a period of 12 months with effect from the date of appointment to cover the county and for the post to carry approved car user status. This post may be hosted by social care or health.
 - ii.6 fte (222 hours) Occupational Therapists, Pay Band A/B, scp 29-39 (£24,646 - £32,800) be established on a permanent basis and the posts be allocated approved car user status.
- (i) Assistive Technology - **£120,000**
- (j) Medicines Management - **£30,000**
- (k) Temporary Commissioning Officer - **£48,500**
 - i.1 fte (37 hours) temporary Commissioning Officer post, Band C scp 39-44 (£32,800 - £37,206) be extended for a further 12 months, be allocated approved car user status and based at County Hall.
- (l) Care Homes - **£1,000,000**
- (m) Independent Sector Partnership and Workforce Development - **£378,352**
 - i. Nottinghamshire Partnership for Social Care Workforce Development (NPSCWD) - including; Training programmes, web site development, infrastructure costs
 - ii. 1 fte (37 hours) Strategic Manager, Pay Band D, scp 42-47 (£35,430 - £39,855) be established for 2 years up to the 31 October 2014 and the post be allocated approved car user status
 - iii. 1 fte (37 hours) Training Co-ordinator, Grade 5, scp 24-38 (£20,858- £23,708) be established for 2 years up to the 31 October 2014 and the post be allocated approved car user status
 - iv. 0.7 fte (26 hours) temporary Workforce Development Officer, Band A, scp 29-39 (£24,646 - £28,636) be extended and funded from money received from the Strategic Health Authority until 31 March 2013 and then s256 to 31 March 2014. The post will be allocated approved car user status and based at County Hall.
- (n) Direct Payments - **£500,000**
- (o) Advocacy Services - **£115,767**
- (p) Support to Carers - **£23,236**
- (2) That approval be given to the funding of the total expenditure of £5,765,455 as follows:

Departmental Reserve	£1,853,799
Total	£5,615,455
NHS Contribution (Reablement Funding)	£ 150,000
Total Funding	£5,765,455

- (3) That a further update report be presented to Committee as required or in 12 months time.

ACCESS TO GOOD INFORMATION AND WEB-BASED INFORMATION DIRECTORY

RESOLVED: 2012/053

- (1) That approval be given to the purchase of an appropriate web-based information directory costing up to £77,000.
- (2) That a temporary 1 fte (37 hours) Commissioning Officer post, Pay Band C, scp 39-44 (£32,800 - £37,206 per annum) be established for one year with effect from the date of appointment, based in the Joint Commissioning Unit at County Hall and the post be allocated an approved car user status.

USE OF ASSISTIVE TECHNOLOGY TO SUPPORT VULNERABLE PEOPLE AND CARERS

RESOLVED: 2012/054

That the report be noted, and a further report be presented in September 2013 to update on the progress of assistive technology use in maintaining the independence of vulnerable people.

WORK PROGRAMME

RESOLVED: 2012/055

That the work programme be noted.

The meeting closed at 12.45 pm.

CHAIRMAN

26th November 2012**Agenda Item: 5****REPORT OF THE SERVICE DIRECTOR FOR JOINT COMMISSIONING,
QUALITY AND BUSINESS CHANGE****PRESENTATION ON QUALITY IN CARE SERVICES****Purpose of the Report**

1. To note and to consider the roles and responsibilities of the key statutory agencies and of care providers in monitoring and/or ensuring good quality care services across Nottinghamshire.

Information and Advice

2. Further to the report to Council on 1st November 2012 on quality in care services (see **Appendix A**) a presentation is to be given to enable more detailed consideration to be given to the work of key agencies in regulating and monitoring care services.
3. The presentation seeks to inform the Committee of the roles and responsibilities of each of the agencies and also the ways in which these roles help and support providers to develop and improve the quality of the services they deliver either within care homes or in the community in people's own homes.
4. Contributors to the presentation are:

Vicki Wells who is the Head of Regional Compliance (Central Region-East) at the Care Quality Commission

Amanda Sullivan who is the Chief Operating Officer for Newark and Sherwood, and Ashfield and Mansfield Clinical Commissioning Groups and who is the Safeguarding Lead for Health and also the vice chair of the Nottinghamshire Adults Safeguarding Board

Anita Astle who is the Managing Director of Wren Hall Nursing Home, and the Clinical Lead for the Community Project

Caroline Baria, Service Director, Joint Commissioning, Quality and Business Change who has the lead on Adults Safeguarding and on commissioning of care and support services from independent sector providers.

Statutory and Policy Implications

5. 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) It is recommended that Members note and consider the work undertaken by the key statutory agencies and by care providers in monitoring and/or ensuring good quality care services across Nottinghamshire.

CAROLINE BARIA

Service Director, Joint Commissioning, Quality and Business Change

For any enquiries about this report please contact:

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Background Papers

None.

Electoral Division(s) and Member(s) Affected

All.

ASCH75

REPORT OF THE CHAIRMAN OF THE ADULT SOCIAL CARE AND HEALTH COMMITTEE

QUALITY IN CARE SERVICES

Purpose of the Report

6. To inform Members of the work undertaken within the Adult Social Care, Health and Public Protection Department (ASCH&PP Department) to audit and monitor the quality of social care services provided in care homes and in people's own homes.

Information and Advice

7. The total budgeted gross expenditure on adult social care in 2012/13 is £300 million of which a sum of £261 million is being spent on care and support services. Of this sum an estimated £226 million (86%) is used to commission care and support services from the independent sector, including voluntary sector organisations and private organisations.
8. The care and support services are commissioned through contractual arrangements and the Department has contracts in place with providers as follows:
 - 294 care homes within Nottinghamshire – approximately 174 for older people and 120 for younger adults
 - 29 home care agencies
 - 30 Care, Support and Enablement providers who deliver care and support to younger adults in supported living services
 - a wide range of providers delivering housing related support, such as information, advice and support to help maintain people in their tenancies
 - independent sector providers of day care services.
9. The majority of these social care services, which entail the delivery of personal care, require registration with the Care Quality Commission (CQC) which is responsible for registering and regulating both the health and social care sector. Agencies that are required to register with the CQC include care homes and home care agencies. Providers of day care and housing related support do not need to be registered with the CQC.

The role of the Adult Social Care, Health and Public Protection Department

10. The ASCH&PP Department has a statutory duty to undertake an assessment of need to determine the level of care and support required by service users and where relevant their carers. The assessment also includes completing a financial assessment to determine the service user's contribution to their care, based on their financial circumstances.
11. The department also has a duty to undertake an annual review of each service user to ensure that the services continue to meet their needs. The reviews are undertaken by social work staff based in the locality teams. These reviews provide staff with the opportunity to ensure that service users are receiving a good quality service.
12. Of the 294 care homes in Nottinghamshire, the table below shows that there are approximately 6,622 care home beds available in Nottinghamshire. This includes placements for all service users groups. As well as placements funded by Nottinghamshire County Council, a number of placements are arranged and funded by the NHS in nursing care where the service users meet the NHS Continuing Health Care criteria, or by people who fund their own care, or which are arranged and funded by other Councils. It is important to note that not all the places are occupied all of the time and most, if not all care homes, will have vacancies at varying levels.

Table 1: Placements within care homes in Nottinghamshire

Total Number of care home places in Nottinghamshire	6,622
Nottinghamshire County Council funded placements	3617 (at Sept 2012)
Self Funders	764
NHS funded placements	85
Placements funded by other Councils	185 (approx)

Quality monitoring

13. Through its Market Development and Care Standards Team, the ASCH&PP Department has responsibility for developing a diverse social care market within Nottinghamshire which can support the delivery of safe, good quality, affordable services. The Department is required to ensure that there is sufficient capacity in the market to meet needs both for those service users for whom the Council has funding responsibility and also for people who fund their own care.
14. One of the Market Development and Care Standards Team's key functions is to undertake annual auditing of care and support services using comprehensive audit tools to ensure the audits are robust and consistent. The Quality Audit Framework used to audit care homes

can be found in the background papers. The audit tools are reviewed annually to ensure providers are demonstrating continuous improvement in the quality of the care they provide.

15. The Market Development and Care Standards Team, consisting of 16 officers, including the Team Manager, covers the range of externally commissioned social care services. Table 2, below, identifies the number of officers in the team and the areas of service that they cover.

Table 2: Staffing structure and compliment of the Market Development and Care Standards Team

Team Manager	
5 Market Development Officers:	10 Quality Development Officers:
Care Homes, Older People	Care Homes, Older People x 4
Care Homes, Younger Adults	Care Homes, Younger Adults x 2
Home Care	Home Care x 2
Supported Living, Younger Adults	Supported living x 1
Day Care and Carers' Services	
Supporting People funded Services	Supporting People x 1

16. The number of Quality Development Officers is high in Nottinghamshire compared to neighbouring County Councils and these officers carry out higher levels of visits to care providers as part of their auditing and monitoring activities.
17. During 2012/13, the team is scheduled to undertake an annual quality audit of all 174 care homes for older people and 120 care homes for younger adults. Annual quality audits will also be undertaken with the 30 existing domiciliary care providers and 30 care, support and enablement providers. Plans are also underway to commence quality auditing of independent sector day care services. The audits are undertaken by Quality Development Officers (QDOs), each of whom is assigned specific service areas and specific providers.
18. Each audit takes approximately 2 days to complete with one day spent on the site visit and the equivalent of one day to gather supporting information and to write the report. Through the audit process, the QDOs seek to ensure that the providers are meeting the following objectives:
- the health, well-being and safety of people using care services is maintained and promoted
 - service users are treated with dignity and respect
 - that service users and their carers have choice and control over the services they receive
 - to ensure that care staff are appropriately trained to deliver the services

19. The audit process will entail detailed discussions with the registered/nominated manager, with some of the care staff, and with service users and carers where appropriate. The audit also entails looking through the provider's records to ensure that:

- they are implementing safe recruitment practices, including undertaking CRB checks and following up references
- there are sufficient numbers of staff on the rotas to meet the needs of the service users
- care staff are following appropriate practice in terms of moving and handling, safe medication management and practice, appropriate infection control etc
- staff have relevant and up to date training, including refresher training
- where the provider is caring for people with dementia, then staff are suitably trained and experienced
- care records are kept up to date and care plans are personalised, recording each service user's specific needs

20. Where the audit process identifies concerns about the quality of care being provided then the QDO will make recommendations to the provider who will be required to develop and implement an action plan, within specified timeframes, to address the areas of concern. The concerns may range from poor recording such as that of service users' care plans, or care plans not being updated through to insufficient evidence of training of care staff, or high levels of staff turnover resulting in inconsistent and poor care management and practice. Where concerns have been raised through the audit process, the QDO will undertake a follow up visit to ensure that the actions have been implemented.

21. In addition to the annual audit process, the Market Development and Care Standards team will respond to any concerns or complaints that are received relating to the quality of care and support services.

22. Complaints or concerns are routed through the Customer Services Centre and may come from a number of sources including:

- family members or carers
- operational staff
- GPs and health practitioners
- the provider's own staff, through their whistle blowing procedures
- members of the public
- the CQC.

23. If the concern or complaint indicates that a vulnerable adult or older person is at risk of harm then in accordance with Nottinghamshire's multi-agency safeguarding procedures, the referral will be passed immediately, by the Customer Service Centre, to the relevant local operational team. The operational team will undertake initial enquires to ascertain the nature of the referral and will instigate a safeguarding assessment where a service user has been deemed to have been at risk of harm. If the initial enquiries undertaken by the operational team identify do not indicate that a service user has been at risk of harm but identify general concerns about the quality of care or poor practice, then the matter will be passed to the Market Development and Care Standards Team.

24. The team will gather information from the relevant sources and will undertake a monitoring visit to the care home or in the case of a home care agency to the provider's registered office. The monitoring visit will include speaking to the manager of the home, to care staff and to carers and family members where relevant and appropriate. The aim of the monitoring visit will be to work with the provider to ensure the concerns are addressed swiftly and robustly.

The role of NHS commissioners in quality monitoring

25. NHS Nottinghamshire County PCT plays an active role in monitoring health care practice and provision in care homes. The range of health clinicians visiting residents in care homes on a regular and routine basis includes:

- District nurses
- Continuing Health Care nurses
- GPs
- Pharmacy Services.

26. Where care homes are registered with the CQC to provide nursing care, NHS Nottinghamshire County PCT undertakes annual quality audits in each nursing home. The PCT employs two officers, known as Safeguarding and Monitoring Leads, who complete the annual quality audits. If and where the Safeguarding and Monitoring Leads have concerns about particular aspects of health care practice or poor quality provision within a home, such as medication management or infection control, they may make a referral to the specialist health care teams requesting specialist pharmacy audits or infection control audits. The Safeguarding and Monitoring Leads will undertake follow-up visits to the nursing home to ensure the required actions are implemented.

27. Frequently, the Safeguarding and Monitoring Leads will accompany the Council's QDOs to a nursing home as part of a joint audit or monitoring visit where the QDO has identified poor practice or concerns about clinical issues. A joint monitoring report will be produced following these visits, and the provider will be required to implement an action plan which will be monitored by both the health and social care quality monitoring staff.

The role of the Care Quality Commission

28. The CQC has the statutory duty to inspect all registered care services. Their role also entails taking action against providers who are not meeting the required standards.

29. As part of its inspection process the CQC gathers information from all sources about each care home to enable it to assess levels of risk to residents. The CQC undertakes unannounced visits to all care homes as part of its inspection process. Each home is inspected against 5 key standards as follows:

- standards relating to treating people with respect and involving them in their care
- standards relating to providing care, treatment and support which meets people's needs
- standards relating to caring for people safely and protecting them from harm
- standards relating to staffing
- standards relating to management.

30. Under each of the above key standards are a set of outcomes and the CQC inspections will check that the home is meeting the outcomes attributable to each of the standards, although the inspection will not necessarily cover all of the outcomes. Where the CQC finds that a provider has failed to meet one or more of the above standards, it determines the level of impact that this will have on service users on the basis of minor risk, moderate risk or major risk. The CQC then decides whether it will take compliance actions or enforcement actions against the home.

Compliance Actions – where a provider is not meeting the key standards but service users are not considered to be at immediate risk of serious harm, the CQC will usually take Compliance Action and require the home to complete and implement an action plan to address the concerns.

Enforcement Action will be taken where the CQC has identified an urgent need for changes reflecting the levels of risk to service users and this is usually in the form of a **Warning Notice**. The CQC will also issue Warning Notices where there has been a persistent failure by a Provider to adhere with Compliance Actions.

31. As well as scheduled unannounced visits, the CQC also undertakes inspection visits to care homes in response to concerns raised either by family members/carers or members of the public, as a result of care staff from the home raising concerns through whistle-blowing procedures, or as a result of issues raised by Council officers either formally through information sharing meetings or following our own monitoring activities.

Raising Awareness about Safeguarding

32. Prior to the 'No Secrets' guidance published by the Department of Health in 2000, there was little awareness or recognition nationally that vulnerable adults and older people may be, and are at times, at risk of abuse. In comparison Area Child Protection Committees (ACPC) were established in 1974 following a high profile child death and the multi-agency arrangements for overseeing the effectiveness of the protection of children have been strengthened over the years. ACPCs have subsequently developed into Local Safeguarding Children Boards which are established on a statutory footing.
33. Adult safeguarding procedures were developed following the 'No Secrets' guidance and, since this time, awareness and understanding about risks to vulnerable adults has increased significantly.
34. Over a number of years, in Nottinghamshire there have been a significantly higher number of safeguarding referrals than that of neighbouring local authorities. Of the referrals that are received, after initial enquiries are completed approximately 30% – 40% are progressed to a safeguarding assessment. Many of the referrals that do not progress to a safeguarding assessment may require alternative actions such as an assessment of need, or arrangement for short term preventative services. Of the 30% – 40% of that progress to a safeguarding assessment, approximately 1 in 4 or 5 will be substantiated.
35. The higher number of safeguarding referrals in Nottinghamshire is due to the proactive approach the Council has taken in raising awareness about risks to vulnerable adults. The measures taken include:

- running a number of publicity campaigns so that members of the public know how to raise concerns if they are worried about the safety and well-being of a vulnerable person or an older person
 - working directly with care providers informing them of the process to follow to raise concerns
 - developing and promoting a Thresholds and Pathways Document for providers of care service and statutory agencies, including health professionals, identifying where and when to make a safeguarding referral
 - ensuring care providers have whistle blowing policies in place so that their staff have the confidence to raise concerns about care practices without fear of reprisals.
36. Nationally there is evidence of high profile situations and cases where a lack of awareness, training and robust procedures has resulted in a high level of risk to people's safety. The Council has sought to encourage openness and transparency in the raising of complaints and concerns and this approach has enabled officers to be proactive in addressing safeguarding concerns quickly to ensure that vulnerable people are not placed at risk of significant harm.

Information Sharing Processes

37. Through its quality audit process and monitoring activities, and through the service user reviews undertaken by social work staff in the localities, the Department has a high level of knowledge and intelligence about the quality of care delivered by the providers with whom the Council has a contract. In addition to the Department's own monitoring activities, officers have regular contact with the CQC and with health partners to share intelligence particularly in relation to providers where there are concerns about the quality of care.
38. Historically, the Department had established regular Information Sharing meetings with the CQC's local Compliance Manager. The purpose of these meetings is to share information about care homes and home care agencies where concerns and complaints have been raised which have resulted in safeguarding assessments and also where a number of concerns have been identified about general poor practice and poor quality of care provided. These meetings also enable patterns of poor practice to be identified including the causes such as frequent changes in the nominated manager, or high levels of staff turnover.
39. The CQC nationally has undergone significant structural changes over the past couple of years and has also changed its inspection activities, introducing a new inspection framework in October 2011. There have also been significant changes in the staffing structure and staffing levels in the local area and in the region. These changes had impacted on the CQC's ability to attend information sharing meetings during 2010 and 2011, but as the new structure and the new regulatory framework have bedded in, the CQC has once again begun to attend the scheduled information sharing meetings.
40. In addition to the scheduled meetings with the CQC, if and where officers have concerns about poor practice in a care home or within a home care agency, then the Market Development and Care Standards Team will contact the Compliance Manager or relevant inspector at the CQC to notify them of the concerns. Usually the concerns will have been identified following an annual audit visit or a follow-up monitoring visit, or as a result of

concerns identified by social work staff arising from a review in relation to an individual service user, or following a safeguarding referral.

41. With regards to the 16 care homes that the CQC rated as failing all 5 of the key standards following their inspections during 2011 and 2012, officers from the Department notified the CQC of concerns in relation to 8 of these. As a result of the information shared by the Council, the CQC brought forward a scheduled inspection or undertook an unplanned visit and subsequently put in place measures for improvement either through compliance action or enforcement action.
42. The Department also works closely with health colleagues and has a well established process for sharing information on a regular basis and for undertaking joint monitoring activities. If and where the annual audit process identifies health related concerns such as medication management, the care of pressure areas, nutrition (weight loss/weight gain/diet), specific health conditions, infection control etc. these matters will be referred to health colleagues. Frequently these will result in a joint monitoring visit being undertaken and/or a referral made to health colleagues to undertake a pharmacy audit, or an infection control audit, depending on the nature of the concerns.
43. Information is also shared on a routine basis with colleagues within the City Council where the care provider also provides care to service users for whom the City Council has funding responsibilities. This is a reciprocal arrangement and City Council colleagues will notify the Market Development Team where they have concerns about a home which has one or more County funded service users.

Escalation Processes and Suspension of Contracts

44. Where there is a pattern of poor practice which poses a risk to the safety and well-being of service users, and where the provider is not able or willing to make the required improvements, then the Department will escalate the actions taken against the provider. In gathering evidence of poor practice through the auditing and monitoring activities of the QDOs, the reviewing activities of social care staff and through information sharing, the Team Manager of the Market Development Team will determine whether action needs to be taken to suspend the contract so that no new placements are made to home pending satisfactory implementation of the required actions.
45. Historically, the CQC has not routinely notified the Council where, following an inspection, it has taken enforcement action against a home. In recent discussions with the two local Compliance Managers there has been an agreement for more proactive information sharing especially where the CQC is planning to issue a warning notice to a home in order to enable swift risk management by the Council.
46. The contract will also be suspended in instances where a safeguarding referral has identified that a service user has been harmed as a result of the practice of care staff. In all cases where a contract is suspended, the Department will notify the CQC and relevant health colleagues. The suspension will remain in place until it is evident through a follow up visit that all the required actions have been implemented and that safety and well-being of service users is no longer at risk.

47. Where contracts with care providers are suspended, the QDOs and Market Development Officers work directly with the provider and/or nominated manager to support them to make the necessary changes to improve their care services. If, despite the help and support provided by the Department, the provider does not improve the quality of their service and where service users are considered to be at risk of significant harm, then the Department will take action to notify relatives and carers of the concerns. The Department will instigate a meeting with relatives and carers to notify them of the extent of the concerns and to advise them of their right to consider moving a service user to an alternative placement. The Department will help and support relatives and carers to find a suitable alternative placement as and where requested. Ultimately if a relative does not want the service user to move to another home then the Department will not be able to override their decision.
48. Only the CQC has the statutory powers to deregister a care provider. The CQC may instigate enforcement action and notify the provider of their intention to seek cancellation of their registration. This process can take months to implement as the provider has the right of appeal at various stages of the process. Alternatively, through their urgent measures the CQC can seek an order from the Court to cancel a provider's registration with immediate effect.
49. On occasion, where the CQC has insufficient evidence to take action to cancel a provider's registration but where the Council has had concerns about the quality of services in a care home and where, despite considerable support, training and advice from social care and health care staff, the home is persistently failing to provide good quality care, the Council has taken measures to notify relatives and carers of the service users of the nature and extent of the Council's concerns and has advised them that they should consider moving their relative to another home.
50. Ultimately, the Department is able to terminate the contract with a care provider but this is usually taken as a last resort and only if the provider has continually failed to make improvements and is placing service users at risk of significant harm. It is recognised that moving service users to another home can pose a serious risk to their health and well-being especially where they are in the latter stage of life, or whether they have late stage dementia. It is essential that everything is done in the best interests of the resident.
51. Prior to terminating the contract, the Department will meet with relatives and carers and notify them of the intention to terminate the contract and the implications of this. The Department has limited powers to move service users to an alternative placement if relatives or carers do not give their consent. The Department will work with health colleagues throughout this process, including undertaking a joint assessment of need to ensure that the most suitable alternative placement may be found for each service user. Additionally, the Department will undertake a Best Interest Assessment, in accordance with the Mental Capacity Act where the service user does not have capacity, in order to ensure that the interests of the service user are given paramount consideration.
52. It is important that members of the public have confidence that care and support providers are delivering good quality, safe services. It is essential that the system of auditing and monitoring care services is kept under review to ensure that concerns are reported, investigated and addressed robustly. The auditing and monitoring systems in Nottinghamshire compare well with those in other areas but will be kept under continuous review.

Proactive approaches to help maintain good quality care provision

53. The greater proportion of care providers are providing good quality care and have a highly motivated and committed team of care staff who provide high quality care services; where this falls short action is always taken.
54. The Council continues to work proactively with providers in order to enable and support them to provide good quality care. This support includes directly providing training to independent sector providers' care staff as well as the Department's own care staff. The Council has also provided funding to providers to access their own training.
55. The Department has been working in partnership with care home providers to invest approximately £352,000 over the next 2 years in additional training for the care sector for improving practice in areas such as dementia care and end of life care. This is in addition to the training that care homes provide for their staff as part of their own responsibilities.
56. Over the past five years the Council has also implemented a local 'Fair Price for care' framework which has entailed rewarding good quality care with higher fee levels. A review is currently underway in relation to the Fair Price for Care framework and the Department is working with providers with a view to introducing 'Beacon Status' for homes that are excellent to help set standards to which all homes can aspire.
57. These various initiatives aim to support continuous improvements in the quality of care being provided across the county.

Implications for Service Users

58. Through the various approaches taken by the Department in addressing poor quality care and support services, it is able to ensure that service users are protected from significant harm wherever possible.
59. The Council's safeguarding processes encourage and enable complaints to be raised and to be addressed swiftly and robustly.
60. All Council policies are subject to production of an Equality Impact Assessment.

Other Options Considered

61. The ASCH&PP Department reviews its internal processes, including its auditing and monitoring activities to ensure that the quality of care services continues to improve.

Statutory and Policy Implications

62. 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:

- 2) Members note and comment on the activities undertaken by the ASCH&PP Department in working in partnership with providers of care and support services and with other statutory agencies to help improve the quality of care services provided to service users across the county.

COUNCILLOR KEVIN ROSTANCE

Chairman of the Adult Social Care and Health Committee

For any enquiries about this report please contact:

Caroline Baria,
Service Director, Joint Commissioning, Quality and Business Change
Email:caroline.baria@nottsc.gov.uk

Constitutional Comments (LMc 23/10/12)

63. The recommendations in the report fall within the remit of Full Council.

Financial Comments (NDR 23/10/2012)

64. 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.

1. Quality Audit Framework 2011
2. Framework Descriptors 2011

Electoral Division(s) and Member(s) Affected

All.

CC107

26th November 2012**Agenda Item: 6****REPORT OF THE INDEPENDENT CHAIR FOR THE NOTTINGHAMSHIRE
SAFEGUARDING ADULTS BOARD****NOTTINGHAMSHIRE SAFEGUARDING ADULTS BOARD****Purpose of the Report**

1. To provide a six monthly update on the work and progress of the Nottinghamshire Safeguarding Adults Board.

Information and Advice

2. The Nottinghamshire Safeguarding Adults Board (NSAB) is the multi-agency group of senior managers from key organisations responsible for developing and implementing Nottinghamshire's strategy to safeguard vulnerable adults. Safeguarding adults is a phrase which means all work which enables an adult who is or may be in need of community care services to retain independence, wellbeing and choice and to access their human right to live a life that is free from abuse and neglect. NSAB is chaired by an independent person, Allan Breeton, and the vice chair is a Chief Operating Officer of two Clinical Commissioning Groups, Amanda Sullivan. There are four sub-groups which sit under the Board with representatives of each of the statutory agencies. These sub-groups; Quality Assurance, Serious Case Review, Training, and Communications, implement the actions arising from the Board.
3. Over the past six months the work of the Board has been focused in the following areas:

- **Peer Review**

In November 2011 NSAB commissioned a peer review into all aspects of safeguarding adults in the County to provide independent scrutiny and quality assurance of its safeguarding processes. The review found that safeguarding adults practice and procedures in Nottinghamshire are "sound". However, a detailed report was produced with a number of recommendations and associated action plan. The Board is currently overseeing the implementation of this.

- **Serious Case Review**

The serious case review sub-group considers cases of death or serious harm to vulnerable adults where abuse or neglect is known or suspected to be a factor. It ensures that the circumstances are thoroughly reviewed and lessons learned. Serious case reviews have

been undertaken under national guidance since 2007. During that time NSAB has commissioned five serious case reviews within Nottinghamshire; three in 2009, one in 2010, one in 2011 and the most recent review was commissioned in February 2012. This review has recently been completed and the final report was considered by the Board at the most recent NSAB meeting on 11th October 2012. In each of these cases the Independent Author made a series of recommendations to ensure that lessons are learned by the relevant agencies so that similar circumstances are, wherever possible, avoided in the future.

- **Training**

The Board continues to oversee the delivery of both individual and multi agency training via the training sub group. This comprises of the regular and ongoing training which is provided for Safeguarding Referrers, Investigating Officers, Safeguarding Managers and Training for Trainers. In addition, the Board hosted a “one-off” training event which considered the criminal offence introduced by Section 44 of the Mental Capacity Act (2005) – “Wilful neglect or ill treatment of a person who lacks capacity”. This event brought together a range of police, health and social care practitioners to explore the issues connected with this relatively new piece of legislation and to find ways of overcoming barriers to its appropriate use.

- **Partnership Board**

The Nottinghamshire Safeguarding Adults Partnership Board is a broad group of organisations drawn from across Nottinghamshire consisting of agencies from the public, private and voluntary sector that have an interest in Adult Safeguarding. The Partnership Board meets twice yearly and provides for a two way flow of information between NSAB and those organisations which are able to contribute to the safeguarding agenda. We have forged strong links with the Nottinghamshire Coroner who gave a presentation at a recent Partnership event which was extremely well received. In May this year the half day event focused on raising awareness of the Mental Capacity Act. It included presentations and case studies and allowed those present to consider what further work is needed to fully embed the Act within their organisations.

Much of the work of the Partnership is focused on raising awareness of safeguarding and ensuring all agencies and their staff are able to identify safeguarding concerns and are familiar with the process to follow to make a “referral”. The pro-active work in this area has contributed to the high number of safeguarding referrals which Nottinghamshire historically has in comparison to neighbouring Council areas.

The “good neighbour campaign” was launched by the communications sub-group in June 2012 as one part of the Board’s wider communication strategy. This campaign aims to raise awareness of what we can do to “look out” for those who may be more at risk in our communities.

- **Quality Assurance**

In addition to the peer review mentioned above, the Board continues to monitor the quality of its safeguarding response via the Quality Assurance sub-group. Regular audits of safeguarding assessments are undertaken and learning fed back to individual practitioners and wider audiences where necessary. The sub-group has developed a “Thresholds and

Pathways” document which supports the multi-agency procedures and provides further advice and guidance on the referral process.

- **Multi-Agency Safeguarding Procedures**

The Board has worked hard to improve the application of the safeguarding procedures. This has resulted in a significant improvement in the recording of safeguarding plans following on from safeguarding assessments.

- **Multi-Agency Safeguarding Hub (MASH)**

NSAB has fully supported the work currently taking place to establish the MASH. This has included representation on the MASH Strategic Board and also the Safeguarding Adults Group Manager is leading on the workstream to establish operational procedures. This will ensure that Safeguarding Adults is able to reap the full benefits of closer inter-agency working at the point of referral and throughout the safeguarding process.

- **Annual report**

The Board produces an annual report which contains both statistical and qualitative information on its performance and that of adult safeguarding in the preceding year. In the most recent 2010/2011 report the Board responded to feedback and changed the format of the report. It is shorter with less statistics, user friendly, focused on outcomes and how the Board has “made a difference”.

Created in April 2008 the Board builds upon the seminal work undertaken by its predecessor, the Nottinghamshire Committee for the Protection of Vulnerable Adults (NCPVA). Allan Breeton was appointed as independent chair for NSAB in the autumn of 2009. The Board has worked hard to promote the message first articulated in the Department of Health (2000) “No Secrets” document which states “There can be no secrets and no hiding place when it comes to exposing the abuse of vulnerable adults”. The Board has produced and coordinated multi agency policy which ensures a consistent approach to safeguarding is applied across the county. It has developed a culture of cooperation and critical review which has led to improvements in practice and outcomes for those adults at most risk of abuse. Recent serious case reviews involving adults with pressure ulcers have led to improved monitoring, documentation, recording, and treatment for adults with pressure ulcers and a more coordinated multi-agency response. The Board continues to oversee work programmes which help improve safeguarding awareness and practice across Nottinghamshire.

Statutory and Policy Implications

4. 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 report of the Independent Chair of the Nottinghamshire Safeguarding Adults Board.

ALLAN BREETON

Independent Chair of the Nottinghamshire Safeguarding Adults Board

For any enquiries about this report please contact:

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Constitutional Comments

5. Because this report is for noting only, no constitutional comments are required.

Financial Comments (NDR 02/11/2012)

6. 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) Nottinghamshire Safeguarding Adults Board – [Annual Report 2010/2011](#).

Electoral Division(s) and Member(s) Affected

All.

ASCH64.



26th November 2012

Agenda Item: 7

**REPORT OF THE SERVICE DIRECTOR – JOINT COMMISSIONING,
QUALITY AND BUSINESS CHANGE**

**OVERVIEW OF ADULT SOCIAL CARE AND HEALTH SAVINGS AND
EFFICIENCIES PROGRAMME**

Purpose of the Report

1. This report is for information purposes and updates on the progress of the Adult Social Care, Health and Public Protection (ASCH&PP) Department's four year Savings and Efficiencies Programme (2011/12 to 2014/15) as at the end of September 2012. It compares the department's actual savings achieved for the year to date against its savings target. It also outlines the remaining targets to be met by the department in the future years of delivery.
2. The information outlined in this report covers projects delivered under the remit of the ASC&H Committee only. Separate updates are provided to the Community Safety Committee on those projects coming under the remit of Public Protection.

Information and Advice

3. The budget approved by the County Council on 24th February 2011 required the ASCH&PP department to make savings and efficiencies totalling £63.827 million for the period 2011/12 to 2014/15. Over £27 million of these were to be delivered in the 2011/12 financial year, through delivery of projects spanning across both the Adult Social Care and Health and the Community Safety committees.
4. At the February 2012 County Council budget meeting the total savings target for the department was increased to £65 million over the four years of the programme, with the delivery of a further eight projects.
5. There are currently forty-two savings and efficiency projects being delivered by the department, thirty-nine that fall within the remit of ASC&H committee.
6. As previously reported at the 11th June Committee, the department achieved £24.241 million of its £25.929 million savings target for Year 1 (2011/12), which represented 93% of the target across all of the ASC&H projects (i.e. excluding Public Protection targets).
7. As at the end of September 2012, the department has already achieved £20.481 million (88%) of its Year 2 (2012/13) savings target of £23.164 million (excluding Public Protection figures), although some of this includes delivery of savings slippage from 2011/12.

8. The strong performance to date is due to a number of factors, including:
- a. A number of projects delivering some of their Year 2 (2012/13) savings ahead of schedule during 2011/12.
 - b. The full year effect of savings where activity started to generate savings part way through 2011/12.
 - c. Similarly, some of the projects completed all of their implementation activity during 2011/12, putting in place mechanisms ready for achieving savings during 2012/13.

Current Position

9. Of the forty-two current projects, there are:
- a. Eleven high governance projects (i.e. projects with total savings values of more than £1 million and / or high risk / high complexity), all within ASC&H.
 - b. Thirty-one low governance projects (i.e. projects with total savings values of less than £1 million and / or low risk / low complexity). Of these, 28 come under the remit of ASC&H and three under the remit of Public Protection.
10. The eleven high governance projects are listed in **Appendix A**. A summary of their current status is provided below:
- a. Three projects (*Reablement and Homecare*, *Day Services Modernisation*, and *Review Expenditure on Learning Disability & Mental Health Community Care*) are currently on target to achieve or exceed their Year 2 (2012/13) savings targets.
 - b. Two projects have already been fully completed (*Sale of Residential Care Homes* and *Review of Fair Access to Care Services Eligibility and Support Packages*) and achieved all target savings.
 - c. One project (*Organisational Redesign*) is shortly due to end, and is on target to achieve its total target savings. However, £256,000 of its 2012/13 savings target will slip into 2013/14.
 - d. Another project (*Supporting People*) is on target to meet its 2012/13 savings target but is anticipating slippage of some of its 2013/14 savings targets into 2014/15.
 - e. Similarly, two other projects (*Redesign of Home Based Services* and *Sherwood Industries*) have no savings target for 2012/13 but are anticipating slippage of some of their 2013/14 savings targets into 2014/15.
 - f. One (*Living at Home*) is currently undertaking re-scoping work, which will inform a revised savings profile for the programme.
 - g. One (*Managing ASCH Income*) has no savings target assigned to it, as it is a time limited project established to improve the Department's understanding of income trends.

11. These projects will continue to be scrutinised monthly by the Department's Transformation Board (formerly the Business Improvement Board), attended by the Corporate Director for ASCH&PP and all of the department's service directors. In addition, they are also managed via monthly project boards, established to oversee delivery of each of the high governance projects.

12. Of the twenty-eight low governance projects falling within ASC&H:

- a. thirteen have already been completed, either fully or tasks / savings for 2012/13 have been delivered.
- b. ten are currently 'on target' to achieve their Year 2 (2012/13) savings targets.
- c. one has no savings target assigned for this year, but is on target to achieve its Year 3 (2013/14) savings target.
- d. four are currently anticipating slippage of some of their 2012/13 savings into 2013/14:
 - i. *Adult Care Financial Services*: anticipates slippage of £21,000 savings, due to a delay in instigating staff changes.
 - ii. *Roll Out of Assistive Technology Services*: implementation delay is likely to lead to slippage of some project savings from 2012/13 into 2013/14.
 - iii. *Charging based on Ordinary Residence of Service Users*: amount of slippage currently anticipated is £86,000 from 2012/13 into 2013/14.
 - iv. *Budget Reductions within Learning Disability Teams*: anticipates £55,000 slippage from 2012/13 into 2013/14, due to a delay in re-locating staff into different premises

13. Low Governance projects will continue to be scrutinised monthly by the Savings & Efficiency Board, established to oversee delivery of all ASCH&PP projects, chaired by the service director responsible for delivery of the department's savings and efficiencies programme. Any exceptions will continue to be reported to the department's Transformation Board.

Review of 2012/13 Achievement

14. Moving forward, the department will continue to deliver the remaining savings target for 2012/13, whilst planning ahead for delivery of the remaining two years of the programme (£10,974 million target for 2013/14 and £3.328 million target for 2014/15).

Other Options Considered

15. The department's Transformation Board has commenced work to determine where further savings and efficiencies can be delivered from 2014/15 and beyond.

Reason/s for Recommendation/s

16. Since the completion of the service reviews in 2010/11 across the Council, and during the implementation of the 2011/12 savings and efficiencies projects, the department, through its monthly Business Improvement Board (now Transformation Board), has continued to scrutinise the way in which services are arranged and delivered, with a view to identifying further opportunities for achieving efficiencies and improving services. Examples include maximising opportunities from funding received from the Department of Health to help people to regain and/or maintain their independence through the extension of reablement services, or exploring and developing strategies to encourage micro-providers within the community to set up and provide low level community-based activities and services.

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.

RECOMMENDATION/S

1) It is recommended that the report be noted.

CAROLINE BARIA

Service Director for Joint Commissioning, Quality and Business Change

For any enquiries about this report please contact:

Ellie Davies, Project Manager – Improvement Programme
(ellie.davies@nottscc.gov.uk)

Constitutional Comments

18. Because this report is for noting only, no Constitutional Comments are required.

Financial Comments (NDR 01/11/2012)

19. 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.

- 24th February 2011 County Council – Budget meeting: [11-12 Budget Report](#)
- 23rd February 2012 County Council – Budget meeting: [12-13 Budget Report](#)

Electoral Division(s) and Member(s) Affected

All.

ASCH67

Appendix A: High Governance ASC&H Savings and Efficiency Projects – Progress in Achieving 2012/13 Savings Targets as at end September 2012

Project Name	Total Expected (£000's)	2011/12 Expected (£000's)	2011/12 Actual (£000's)	2012/13 Expected (£000's)	2012/13 Actual To Date (£000's)	2013/14 Expected (£000's)	2014/15 Expected (£000's)
Re-ablement	1,575	875	875	700	507	0	0
Day Services Modernisation	4,436	600	600	1,216	1,140	2,620	0
Reduction in Community Care spend through review of FACs eligibility and support packages	4,425	2,425	1,556	2,000	2,869	0	0
Sale of Residential Care Homes	1,300	625	400	675	900	0	0
Living at Home	3,108	238	0	368	0	1,152	1,350
Review Expenditure on Learning Disability & Mental Health Community Care	5,124	1,281	1,281	1,281	1,998	1,281	1,281
Reductions in Supporting People Budget	10,000	2,423	2,423	4,077	3,751	3,000	500
Organisational Re-design	2,909	1,420	1,420	1,489	45	0	0
Redesign of Home Based Services	865	0	0	0	0	865	0
Sherwood Industries	250	0	0	0	0	250	0
ASC&H Income	0	0	0	0	0	0	0

26th November 2012**Agenda Item: 8****REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND
SUPPORT – YOUNGER ADULTS****EXTENSION OF A TEMPORARY PROJECT MANAGER, DISABLED
PARENTS AND YOUNG CARERS POST****Purpose of the Report**

1. The purpose of this report is to seek approval for the extension of a temporary Project Manager post managing the Young Carers and Disabled Parents project.

Information and Advice

2. In September of this year Committee approved the extension of the temporary young carers Community Care Officer posts to ensure that the current support to young carers could continue. Committee members are now being asked to approve an extension to the project management support which supports these posts and evaluates their work.
3. The post of temporary Project Manager was established to implement the County Council's young carers' strategy, develop the operational and commissioning activity in relation to young carers and raise awareness of support for young carers and disabled parents throughout the Council and in partnership with voluntary organisations. This post has been successful in implementing processes and procedures and encouraging the take up of services.
4. The existing post is due to end on 31st December 2012 and it has been identified that further work is required to oversee the work, publicise the positive work with young carers and to extend and develop links with schools and other young person's services. By the end of this financial year, a total of £1.7m of additional services will have been commissioned over the last two financial years (2011/12 and 2012/13). The post has already drawn together managers and staff from across departments to consider the needs of young carers. The importance of supporting young carers to improve their life chances and reduce the negative impact of caring is being recognised. Young carers already known to the department are benefiting from the support offered through Direct Payments and wider awareness of the issues affecting young carers.
5. Since January 2012 the following objectives have been achieved:

- a. Setting up Personal Budgets for young carers to meet their needs. This has allowed young carers to purchase items of equipment and participate in mainstream educational and leisure activities.
 - b. Identification of 125 young carers in families where a parent with a disability is receiving support or has received a community care assessment.
 - c. Arranging support for 58 families with disabled parents so that young carers are not undertaking care tasks that are inappropriate for their age.
 - d. Raising awareness of the needs of young carers externally with partners, independent organisations and health colleagues. Arranging publicity through internal and external publications and a media campaign.
 - e. Contacting schools and local community organisations to encourage young carers to receive support and have a carers' assessment and in so doing reduce the stigma felt by young carers.
 - f. Working closely with Family Action's 'Young Carers Service' and commissioning personal budgets for young carers.
 - g. Liaising with children's workers in Social Care and Targeted Support so that the needs of the young person and the family are being met.
 - h. Commissioning a parenting programme to support parents with learning disabilities, mental health needs or experiencing difficulties with substance misuse.
 - i. Working in partnership with the 'What About Me' organisation to be a trusted assessor to conduct young carers' assessments on behalf of the Council.
6. The extension of the post is required to:
- Continue raising awareness in relation to young carers; working with external organisations, partner agencies and schools
 - Provide an induction for the new temporary 'community care officers - young carers' in the community mental health teams, in children's services and one physical disability team
 - Provide support for all temporary community care officers working with young carers and develop peer support networks
 - Ensure all adult social care and children's social care staff work with families to meet the needs of young carers
 - Embed the arrangements across all adult and children's services to ensure continued support for young carers
 - Manage the core children's services contract which delivers a parenting programme until May 2013

- Monitor and report on budgets and the effectiveness of the services
 - Evaluate the effectiveness of interventions using results from the University of Nottingham's questionnaires.
7. Alongside the continued work to implement the Young Carers and Disabled Parents strategy, it is anticipated that the post holder will work across Adult Social Care, Health and Public Protection and the Children, Families and Cultural Services departments to support the operational changes to transitions work highlighted to this committee in September of this year. Having already established sound working relationships across the two departments the post holder will be able to assist in the further development of joint working practices.
8. In addition, the department has identified that the transfer of the Independent Living Fund to local authorities, as proposed by Government in September, will require a project manager to oversee and co-ordinate activity between the Council and the Fund. The Fund currently supports 208 disabled adults within the County with sums amounting to £3.6m annually. It is, therefore, proposed that the current project manager for the Young Carers and Disabled Parents work be asked to co-ordinate the department's response to this transfer and act as a point of liaison with the Independent Living Fund to ensure a successful transfer of funding and care management responsibility.

Other Options Considered

9. In relation to the Young Carers project management work, it is recognised that the benefits of continuing to utilise existing knowledge, experience and expertise developed over the last 12 months in relation to young carers outweighs alternative ways of managing the service. The additional tasks in relation to transitions work and the Independent Living Fund can be undertaken by the post holder as an extension to their current workload. It is anticipated that over the course of the next 6 to 12 months, the young carers work should be embedded within practice and become business as usual, whilst the independent Living Fund work will develop over this period as the transfer of funding becomes clearer. The alternative would be to seek additional management capacity to take on this work, however at this stage the department believes that the work can be contained within the current post

Reason/s for Recommendation/s

10. This report seeks to put in place arrangements to continue to deliver effective arrangements and to work across partner agencies to ensure continued support for young carers, together with ensuring a smooth transfer of funding responsibilities between the Independent Living Fund and the authority.

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 this proposal is £42,784.00 including on-costs, approved car user status, to be met from the Disabled Parents and Young Carers budget.

Human Resources Implications

13. The human resources implications are contained in the body of the report.

14. The trade unions have been consulted on the content of this report and UNISON support the proposals but would prefer that the post is permanent.

RECOMMENDATION/S

It is recommended that the Committee approve

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

JON WILSON

Service Director - Personal Care and Support (younger adults)

For any enquiries about this report please contact:

Wendy Adcock,
Group Manager - Disability South
Adult Social Care, Health and Public Protection
0115 8546308

Constitutional Comments (GS 08/11/2012)

15. The Adult Social Care and Health Committee is responsible for approving relevant staffing structures and is the appropriate body to consider the content of this report. The Employment Procedure Rules set out in the Constitution state that the report should include the required advice and HR comments / implications.

Financial Implications (NDR 12/11/2012)

16. The financial implications are set out in paragraph 12 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. Support for disabled parents and young carers – protocol dated July 2011.

- b. Business Case 'Disabled Parents and Young Carers' v1.1 dated 28th September 2011.
- c. Young Carers Strategy for Nottinghamshire dated May 2011.
- d. Delegated Decision – Extension of the Project Manager, Disabled Parents and Young Carers AH/2012/00005 - dated 11th January 2012.

Electoral Division(s) and Member(s) Affected

All.

ASCH66

26th November 2012**Agenda Item: 9****REPORT OF THE SERVICE DIRECTOR FOR PERSONAL CARE AND
SUPPORT – YOUNGER ADULTS****SHARED LIVES - UPDATE****Purpose of the Report**

1. The purpose of this report is to update committee on the development of the Shared Lives service and ask committee to approve the shared lives policy subject to further endorsement and ratification by the County Council's Policy Committee.

Information and Advice

2. At present the County Council operates an Adult Placement Scheme (APS) providing long-term placements and short-term breaks in a carer's home for adults with a learning disability. This model ensures trained and approved carers are able to look after people in a household environment, providing an alternative to residential care. In addition, the scheme provides short-term respite breaks for unpaid/family carers who care for elderly or disabled relatives.
3. In 2011/12, the department developed a business case to propose that the APS service should be developed into a new service, called Shared Lives. Shared Lives is a service delivered by individuals and families within the community to people in need of support in their day-to-day lives. This will move away from the idea of just offering an adult fostering arrangement, to providing a range of flexible support options that promote independence and community inclusion. The scheme will also be expanded to support more adults with a learning disability, as well as other service area groups including mental health, physical disability and older people. This expanded service will allow Shared Lives carers to provide a range of services including:
 - Short or long-term accommodation and support provided within the carers own home.
 - Rehabilitative or transitional support
 - Short breaks - a couple of weeks, over night or just for an evening or a day (e.g. if the service user usually lives with their own family or another shared lives carer)
 - Day time support
 - Outreach support where a carer acts as 'extended family' to someone living in their own home.
4. The service is to be managed by a small team within Nottinghamshire County Council who have the responsibility of recruiting and training carers, taking service user referrals,

matching service users and carers according to the needs of the service user and capacity of the carer. The team will then monitor the placements and offer ongoing support to the carers.

5. Individual carers join the Shared Lives scheme which is registered with the Care Quality Commission (CQC). The Nottinghamshire County Council team includes the scheme's registered manager and ensures that individual carers meet the CQC standards.
6. The overall financial impact of the remodelled service will be to reduce expenditure for Nottinghamshire County Council as Shared Lives will provide alternatives to residential care and further increase community living options for a range of service user situations. This is likely to offer more local solutions for adults, especially in areas of higher cost housing.
7. Earlier in 2012, delegated decision reports approved the disestablishment of the current Adult Placement Service and the establishment of a shared lives service, and the provision of external expertise to assist in the development of the new service.
8. In order to progress the development of the Shared Lives service it has been necessary to review of all existing Adult Placement policy and guidance to develop a single Shared Lives policy document. This is attached at **Appendix A**. This document details the context and nature of the service, the eligibility for services and the authority's responsibilities in connection with the service. The Committee are asked to approve the policy and agree for it be sent on to the Policy Committee for final ratification and endorsement.
9. To date the progress on development of the new service has:
 - Identified an external organisation who can offer expert advice on the development of the shared lives service and entered into an agreement with them to provide a part-time project development manager for 1 year plus 27 days consultancy support.
 - Reviewed the current team structure, written new job descriptions and had posts reviewed by the Job Evaluation team.
 - Completed a consultation process with staff and embarked on the enablement of staff to the new structure.
 - Invited existing carers to an event to celebrate their achievements to date and discuss issues going forward.
 - Started the recruitment of a Team Coordinator.
 - Begun to promote the Shared Lives service model to care management teams.
 - Planned a marketing campaign to promote shared lives to potential carers, an article will be appearing in the November edition of County News and the December edition of frontline magazine in preparation for a recruitment drive in January 2013.
 - Recruited and approved 4 further respite carers. One of these carers is supporting the first shared lives service user with mental health issues. The service user currently has respite in residential care but care managers have struggled to find an appropriate

setting which meets his needs and which his family are happy with. The shared lives alternative is proving popular with both the individual and his parent carers. Another individual has just become homeless following an abusive situation at home. The individual currently has a small supported living package but would have required a residential placement until new accommodation could be found for him as he is too vulnerable to stay in a hostel. He will be moving out after a few weeks back into a home of his own.

10. Further work in progress:

- Existing carers' event and Carer Champions identified to help take the project forward.
- Existing recruitment and approval processes for shared lives carers to be reviewed with a view to making them quicker, less onerous and more effective.
- Review of the current induction and training programme for shared lives carers to ensure it is fit for purpose and incorporates on-going development.
- Recruitment of a Team Coordinator
- Recruitment of a temporary project development manager
- Review of current fees paid to carers and consideration of variable payments based on levels of need of the person being cared for. The way the service is funded also needs to be considered to ensure congruence with personal budget requirements.
- The development of guidance for shared lives carers in consultation with shared lives carers.

11. Future plans are to:

- Officially launch the new Shared Lives service in the New Year
- Undertake an initial recruitment drive and ensure a strategy for ongoing recruitment of shared lives carers to grow the existing scheme and ensure it is sustainable long-term.
- Promote the service across all service areas and ensure an ongoing profile for the service. This will ensure that social workers consider shared lives as an option for people and promote the service where appropriate.
- Explore opportunities to work with children's services on a shared lives service for people in transition.
- Further develop community support and day opportunities within the Shared Lives model.

Statutory and Policy Implications

12. 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

13. The department is undertaking an enabling process within the shared lives team as current workers were mainly qualified social workers. Pay protection will apply for two years for those staff who wish to stay as part of the shared lives service. Voluntary redundancy is also an option. A team leader post is being recruited to.

Financial Implications

14. It is expected that the project will save £450,000 over the next three years. This will be made up of real savings from the staffing restructure, income from service user contributions and cost avoidance as an alternative lower cost option to residential care and potentially, though promoting independence, reduce the future costs for individuals moving onto supported living.

Equal Opportunities Implications

15. The service is currently only available to people with learning disabilities. The new developments will offer opportunities for service users from all user groups.

RECOMMENDATION/S

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

- 1) Approve progress made to develop the Shared Lives Service
- 2) Approve and recommend the Shared Lives Service policy and ask the Policy Committee to adopt the policy at its next meeting.

JON WILSON

Service Director - Personal Care and Support (younger adults)

For any enquiries about this report please contact:

Cath Cameron Jones

Tel: (0115) 9773135

Email: Cath.Cameron-Jones/ss/nottsc

Constitutional Comments (LMC 09/11/2012)

16. The Adult Social Care and Health Committee may approve the recommendations in the report and recommend to the Policy Committee that the policy be approved and adopted by the Council at its next meeting.

Financial Comments (NDR 01/11/2012)

17. The financial implications are set out in paragraph 14 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) Benefits realisation plan 213.
- (b) AH/2012/00040 – Reconfiguration of Existing Adult Placement Scheme Staff Team – 9th May 2012 (previously published).

Electoral Division(s) and Member(s) Affected

All.

ASCH 70



Nottinghamshire County Council

Policy Library Pro Forma

This information will be used to add a policy, procedure, guidance or strategy to the Policy Library.

Title: Shared Lives services in Nottinghamshire

Aim / Summary: To identify the basic principles of Shared Lives services in Nottinghamshire and to clearly identify the service offer to carers and service users and the roles and responsibilities of the carers, service users and Nottinghamshire County Council in relation to the service.

Document type (please choose one)

Policy	X	Guidance	
Strategy		Procedure	

Approved by:

Version number:

Date approved:

Proposed review date:

Subject Areas (choose all relevant)

About the Council		Older people	
Births, Deaths, Marriages		Parking	
Business		Recycling and Waste	
Children and Families		Roads	
Countryside & Environment		Schools	
History and Heritage		Social Care	X
Jobs		Staff	X
Leisure		Travel and Transport	
Libraries			

Author: Cath Cameron-Jones

Responsible team: Shared Lives Team

Contact number:

Contact email:

Please include any supporting documents

1. Current APS carer and service user handbooks will be reviewed in line with this policy in consultation with existing carers and service users.

2. Current APS process documents will be reviewed in line with this policy.

3.

Shared Lives Policy

1. Context

The County Council, as is reflected in its Strategic Plan 2010-14 is committed to ensuring that Nottinghamshire is a place where people want to live and feel safe. Two of the priorities for securing this are:

- to foster aspiration, independence and personal responsibility
- to securing good quality, affordable services.

This policy sets out how the Shared Lives service will be run in Nottinghamshire to provide good quality, value for money services which actively promotes independence and engagement in the local community.

Shared Lives (previously known as Adult Placement) is a service delivered by individuals and families within the community to people in need of support in their day-to-day lives. The service is based on the principle of sharing family life including the carers' home. The service is commissioned by the County Council and is regulated by the Care Quality Commission.

The service can include:

- Short or long term accommodation and support provided within the carers own home.
- Rehabilitative or transitional support
- Short breaks – a couple of weeks, over night or just for an evening or a day (e.g. if the service user usually lives with their own family or another Shared Lives carer)
- Day time support
- Outreach support where a carer acts as 'extended family' to someone living in their own home.

The service may also offer Homeshare where a carer moves into the home of a person needing support.

Shared lives can provide alternatives to residential care or intensive supported living, day service or outreach provided by a personal assistant or support provider who is paid on an hourly basis to deliver support in a structured manner. Shared Lives can also be used as a short or medium term solution to help an individual develop skills around cooking, cleaning, managing bills and money as well as learning how to engage with the community and find natural support networks before moving onto more independent living.

2. Scope of this policy

This policy will include:

- The responsibilities of the Shared Lives service and clarify how this fits within the wider social care responsibilities of the department.
- The criteria for becoming a Shared Lives carer and the terms and conditions of the role.
- The criteria for becoming a Shared Lives service user.

This policy is intended to act as an umbrella under which guidance and procedures will sit.

3. Principles and Commitments

3.1 Values of Nottinghamshire Shared Lives Service

- Respect – through appropriate support of carers and careful matching of service user needs and skills with carer capacity.
- Promoting independence – the service aims to maximise the independence of all service users and will support the carer to facilitate this.
- Social Inclusion – this service is about sharing lives. It may be that an individual shares a carer's home but just as important is the sharing of the carer's community and wider family networks and support the service user to build and maintain their own community networks.
- Safeguarding – the service has a duty of care to both to the service users and carers. Carers have a duty to care for any service users placed with them.

3.2 Service eligibility

Shared Lives is designed to meet the needs of any adult eligible for social care services that are in need of support to enable them to live within the community. This includes individuals who

- Have a learning disability
- Have mental health issues
- Are older people with age related support or care needs
- Have a physical disability
- Have other disabilities or impairments which cause them to be vulnerable or at risk.

Shared Lives Service Users must

- be aged 18 or over
- meet Nottinghamshire County Council's eligibility for social care services as determined through application of the Fair Access to Care services (FACs) criteria
- have had a self directed support assessment which indicates their level of need could be met appropriately by the service within their indicative budget
- have had a risk assessment which takes into account the kind of family they could be supported by and pose no significant risk
- want to receive support within the community as part of a Shared Lives service.

Service users will make a standard weekly contribution to their board and lodgings and may, following a fairer charging assessment, be required to contribute to the cost of their care and support.

Young People in transition to adulthood aged 16+ may begin the introduction process to live with Shared Lives carers prior to their 18th birthday. This may include overnight stays and introductory visits.

4. Commitments

4.1 A Shared Lives Team to undertake the following roles:

- a. A registered manager for the service to comply with Care Quality Commission requirements
- b. Ensure the service and individual carers meet standards as defined by The Care Quality Commission
- c. Promote the Shared Lives service to ensure care managers from both Health and Social care are aware of the service and know how to refer to the service
- d. Promote the Shared Lives service within the wider community to enable an ongoing recruitment process for Shared Lives carers.
- e. Undertake the initial assessment of potential Shared Lives carers and, where relevant, their family, including ensuring relevant checks with the disclosure and barring service are undertaken.
- f. Make recommendations as to potential carers' suitability to the approval panel.
- g. Undertake an assessment of the home to ensure it is suitable for the delivery of Shared Lives services.
- h. Provide directly or source other appropriate training for initial induction and on-going development of the Shared Lives carers.
- i. Receive service user referrals and ensure a robust process is used to achieve the most appropriate match between the service user's needs and skills and the carers ability and capacity.
- j. Provide on-going support to Shared Lives carers in the form of practical help, support, advice and guidance by way of regular contact and discussion through visits, attendance at meetings and training sessions and by telephone
- k. Engage with the service users' care manager to keep them informed of any issues arising and facilitate contact between the Shared Lives carer and care manager as appropriate.
- l. Support the carer to write and update support plans and risk assessments based on the care manager needs assessment and self directed support plan.

4.2 Shared Lives Carers will:

- a. Be committed to the Shared Lives values and are prepared to undertake training to ensure they have the necessary knowledge and skills to provide a safe and supportive service.
- b. Work within guidance provided in the carers' handbook and within the standards required by the Care Quality Commission.
- c. Engage with the Shared Lives team and the service users' care manager to address any issues with the service or individual service user.
- d. Report any concerns regarding the individual service user, including accidents and significant incidents to the care manager according to Nottinghamshire safeguarding guidance.
- e. Feel supported and appropriately trained to undertake the role of carer with any individual they have been matched with.
- f. Be paid according to the level of need of the service user they are working with and the amount of service provided (e.g. taking into account day care or carer breaks services received from an alternative carer or support provider). Payment will be made up of Housing Benefit, any eligible Continuing Health Care contribution and funding from the County Council in the form of a managed budget or paid directly to the service user in the form of a direct payment.
- g. Have a minimum of four weeks entitlement to carer break services per year.

4.3 Care Managers who:

- a. Will ensure FACS criteria are met
- b. Will undertake the initial self directed support assessment and support plan
- c. Will discuss with the service user or family carers Shared Lives as a support option where appropriate
- d. Will, on referral to the Shared Lives service, ensure all information regarding support needs, including issues relating to risk, are shared with the Shared Lives team.
- e. Will review individual support needs at least annually or where the Shared Lives carer feels there is a change in support required.
- f. Will undertake all usual care management functions relating to the service user including safeguarding, mental capacity assessments.
- g. Pass on any concerns regarding the quality of the support or accommodation to the Shared Lives team.

- h. Will, in the event of a breakdown in the support, be responsible for finding alternative accommodation and or support for the service user.

5. Key actions to meet the commitments set out in the policy

The Council will work with carers and service users to review and develop guidance that is fit for purpose. A service user guide and carer handbook will form part of this guidance to ensure all parties are clear about what is expected of them and what they can expect in return. Shared Lives plus national guidance will be taken into account when developing this local guidance. This will be reviewed annually to ensure best practice is maintained.

The Council will review its procedures around the carer approval process and training programmes on an annual basis to ensure that the most efficient and effective methods are in place which ensure the values of the Shared Lives scheme are promoted.

The Council will facilitate a Shared Lives carer event at least annually to allow carers to meet together and with members of the Shared Lives Team to discuss issues, concerns and share good practice.

An update report will be made to Adult Social Care and Health and Public Protection Committee annually on the progress of the service.

26th November 2012

Agenda Item: 10 - amended

**REPORT OF THE GROUP MANAGER, OPERATIONAL POLICY AND
PERFORMANCE****REVISED STRUCTURE FOR COUNTY ENTERPRISE FOODS****Purpose of the Report**

1. The purpose of the report is to seek approval to establish a revised structure for County Enterprise Foods Nottinghamshire, with effect from 31st January 2013, which will reduce the level of subsidy required from the County Council by £105,174 a year.

Information and Advice

2. County Enterprise Foods (CEF), which provides a meals service to service users in their own homes, comprises of a production factory in Worksop which produces frozen and chilled meals and two distribution units based in Rainworth and Warwick that deliver hot, frozen or chilled meals to service users across Nottinghamshire and Warwickshire. The production factory employs a total of 44 staff, of which, 26 are disabled employees on the Work Choice¹ programme.
3. From March 2012 to May 2012 a marketing campaign was undertaken to help promote County Enterprise Foods meals at home service and to increase the take up of service users. At a cost of £8,000, the campaign activity included leaflets with attractive new photography; improved advertising on bus shelters; development and launch of a brand new website; social media advertising; and positive case studies in the local media and partners newsletters. The campaign proved successful with an initial and significant increase in referrals. A current campaign with leaflets being sent by direct mail to 110,000 elderly Nottinghamshire residents is hoping to have a similar positive result. The initial results demonstrate the importance of investing in resources for marketing, both in budget and staff time, to sustain meal numbers and maintain the service to the community.
4. As part of the wider and ongoing review of commercial activity at CEF Nottinghamshire, a review of the staff structure has been undertaken to identify opportunities to reduce the level of subsidy required from the County Council.

¹ **Work Choice** - Work Choice is a government supported employment programme designed specifically for people who due to their disability, may find it difficult to find or keep a job.

Work Choice enables people to find and retain work by identifying their needs and providing the necessary support to fit their requirements. It is often the stepping stone into full unsupported employment for many people.

5. The established structure includes a number of vacant posts that have remained unused for some time but which have never been formally disestablished following previous restructures of the service. The posts had been retained so that they could respond to an increase in demand for meals. The structure has now been reviewed to establish how many driver posts, in particular, are needed to deliver the meals. It is proposed that these unused posts, which are listed below, should be disestablished with effect from 31st January 2013. These posts have not been allocated a budget in 2012/13 and therefore no saving will be realised as a result of this activity.
- 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).
6. The staff structure that CEF is currently operating within is shown in **Appendix 1** of this report. This structure requires a payroll budget of £1,605,107. Consideration has been given to the staff structure in order to identify opportunities to reduce the subsidy requirement. In line with the County Council's vacancy control process this has included scrutiny of all vacancies arising and consideration of expressions of interest in voluntary redundancy received from the staff group.
7. A proposed new structure for CEF Nottinghamshire is shown in **Appendix 2**. The overall impact of the proposed structure will be a reduction of 3.63 FTE posts which will reduce the payroll cost by £105,174 a year to £1,499,933 a year.
8. Implementation of the proposed new structure is predicated on the following activity:
- a. It is proposed that the following 2.63 fte posts, which are currently vacant, are disestablished, with effect from 31st January 2013:
 - 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 frontline supervisory staff (Grade 4 SCP 19-23)
 - 0.25 fte (9.25 hours) Production/delivery frontline supervisory staff (Grade 3 SCP14-18).
 - b. It is proposed that the following post is disestablished with effect from 31st January 2013:
 - 1 fte (37 hours) Operations Supervisor Distribution (Grade 5 SCP 24-28).

The post holder has been consulted with and an alternative post has been identified in the new structure for the post holder. Taking into account the statutory consultation period, this post can be disestablished with effect from 31st January 2013.
 - c. It is proposed that the existing 1 fte temporary post of Team Leader Market Development and Operations (Hay Band B SCP 34-39) is permanently established as from 31st January 2013. This post which was established on a temporary basis in 2008 manages the marketing strategy for CEF which is vital to the operation's ability to maintain existing business and to identify new opportunities for income generation.

9. The proposed structure has been designed taking into account Nottinghamshire County Council's organisational design principles on tiers of management and spans of control. There is, however, an additional supervision function built within the frontline team in order to satisfy the support requirements of the disabled employees working within the service.

Other Options Considered

10. Consideration has been given to the standardisation of the contractual hours worked by the drivers and kitchen staff. Following a period of consultation with the staff group and their recognised trade union representatives it has been concluded that this proposal should not be progressed at this time. The reasons for this are that there are other changes taking place in the department that staff are currently required to adapt to, for example the removal of the cash payment option, and because the proposal to standardise contractual hours would not in itself deliver any significant savings.

Reason for Recommendation

11. The establishment of the proposed new structure for County Enterprise Foods Nottinghamshire will reduce the annual payroll budget by £105,174.

Statutory and Policy Implications

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.

Implications for Service Users

12. The proposed changes will have no impact on the way the meals service is delivered to service users; however the reduction in payroll will mean that County Enterprise Foods is providing a more cost effective meals provision to the residents of Nottinghamshire.

Financial Implications

13. If the proposals are implemented as recommended, savings of £74,353 will be delivered during 2012/13. The full year savings from April 2013 onwards will be £105,174.
14. Only one post proposed for disestablishment is currently occupied and an alternative opportunity has been identified for the post holder within the new structure. Therefore the County Council will not need to make any compulsory redundancies to achieve the proposed new structure.

Equalities Implications

15. The changes in respect of County Enterprise Foods will deliver savings and allow Nottinghamshire County Council to continue to provide a meals service to vulnerable adults in Nottinghamshire.

Human Resources Implications

16. As highlighted in the main body of the report, the Operations Supervisor Distribution post is currently occupied. An alternative vacant post has been identified in the new structure for the post holder.

17. In addition to the changes described in this report it is proposed that, in accordance with the rest of the department, management responsibility for the 4.78 fte administration posts in the new structure will transfer to central Business Support Officers on 31st January 2013. The net budget for these posts is £91,557 which will reduce the staffing budget in County Enterprise Foods to £1,412,882.

RECOMMENDATION/S

In order to implement a revised staff structure for CEF Nottinghamshire, as shown in **Appendix 2**, it is recommended that Members approve the following proposals:

1. The disestablishment of the following un-used and already vacant posts with effect from 31st 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 SCP 14-18)
2. The disestablishment of the following post with effect from 31st January 2013:
 - 1 fte (37 hours) Operations Supervisor Distribution (Grade 5 SCP 24-28)
3. The permanent establishment of Team Leader Market Development and Operations post (Hay Band B SCP 34-39), with effect from 31st January 2013.

JUDITH HORSFALL

Group Manager, Operational Policy and Performance
Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

Judith Horsfall, Group Manager
County Hall, Loughborough Road, West Bridgford, Nottingham, NG2 7QP
Telephone: (0115) 977 2566

Constitutional Comments (GS 05/11/2012)

18. The Adult Social Care and Health Committee is responsible for approving relevant staffing structures and is the appropriate body to consider the content of this report. The Employment Procedure Rules set out in the Constitution state that the report should include the required advice and human resources comments, and that the recognised trade unions will be consulted on all proposed changes to staffing structures.

Financial Comments (TMR 16/11/2012)

19. [The financial implications are as contained in the report.](#)

Background Papers

None.

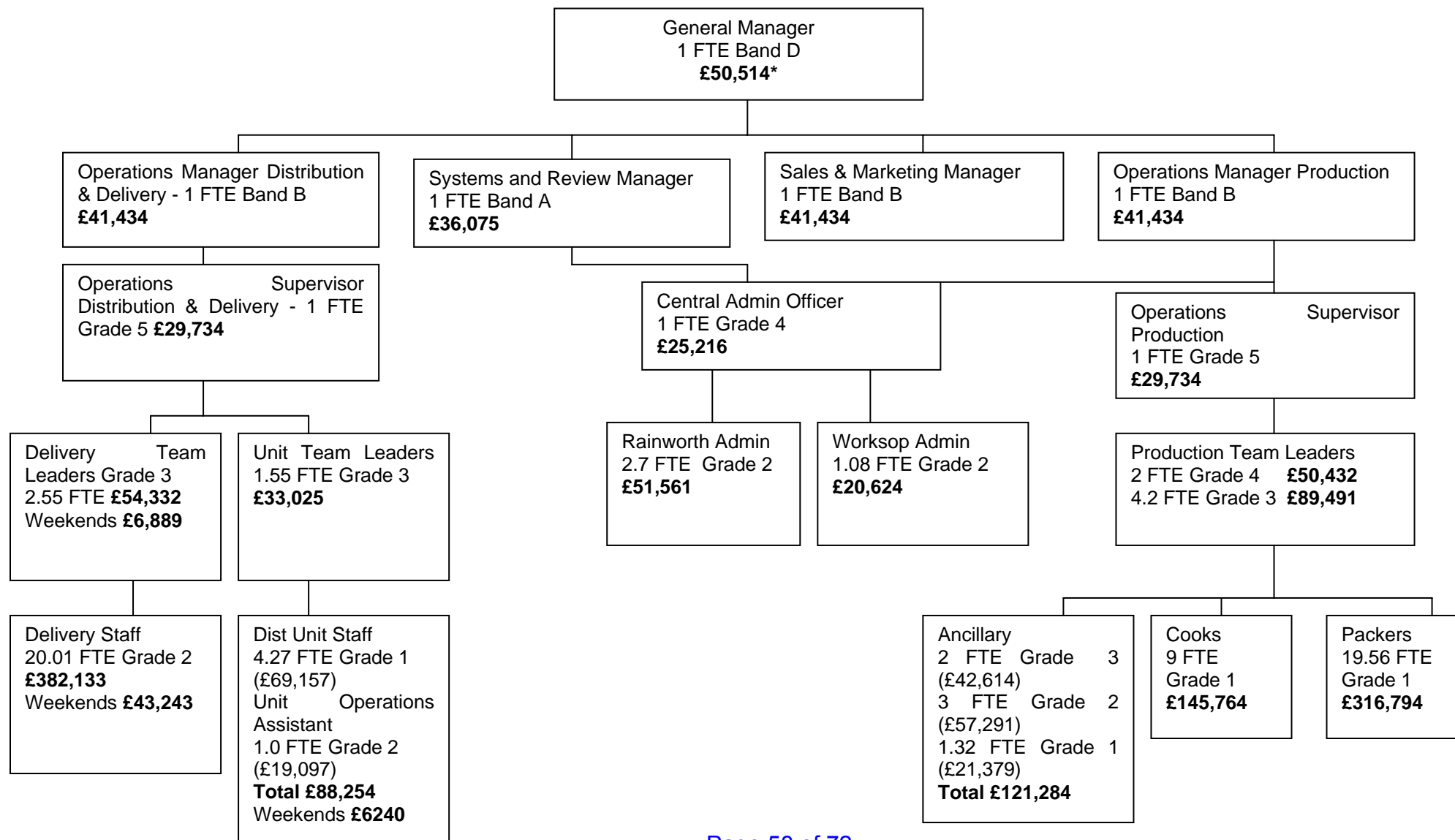
Electoral Division(s) and Member(s) Affected

All.

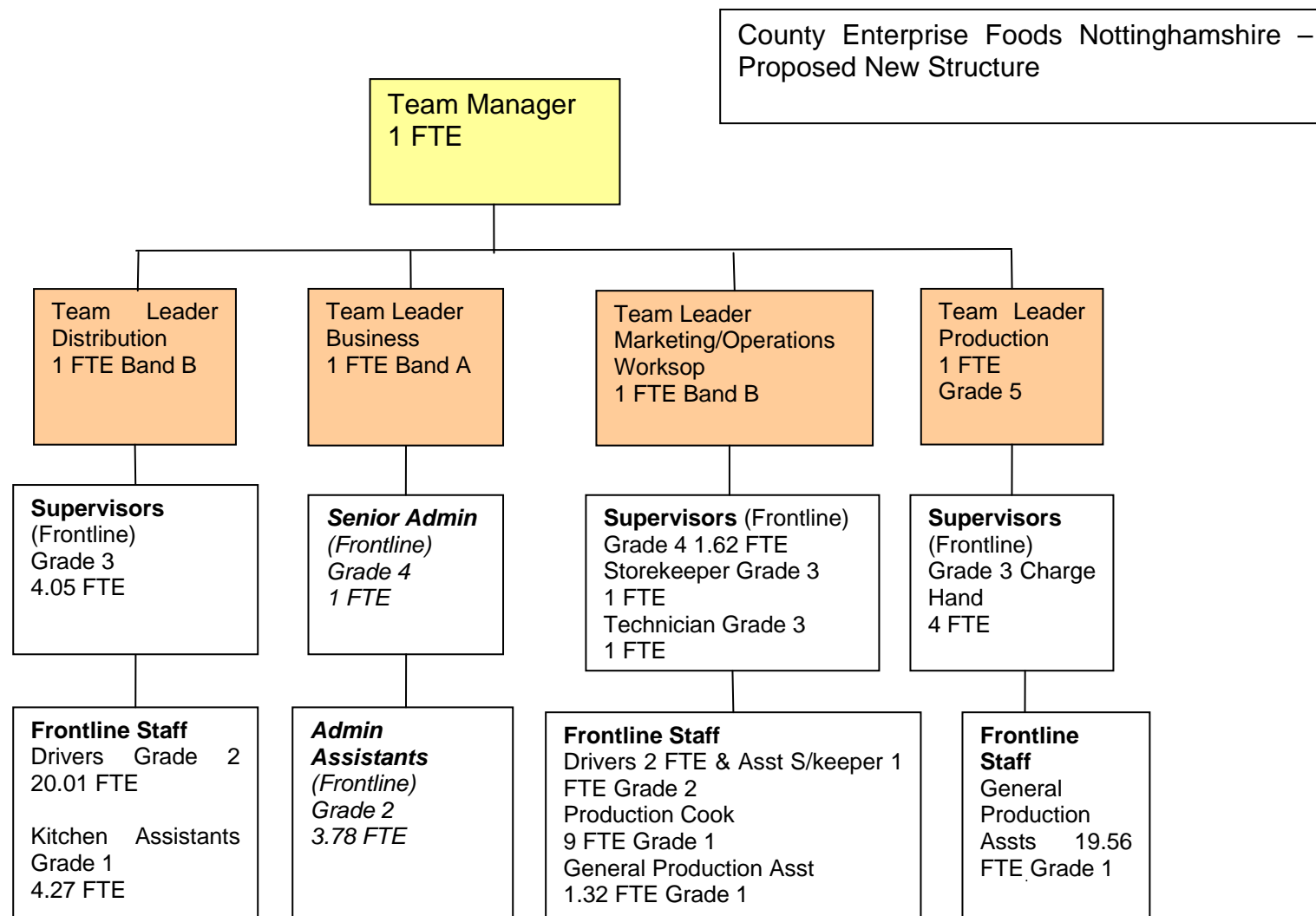
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County Enterprise Foods - Meals at Home Service

Operating Structure



APPENDIX 2



26th November 2012

Agenda Item: 11

REPORT OF THE SERVICE DIRECTOR FOR JOINT COMMISSIONING, QUALITY AND BUSINESS CHANGE

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

Purpose of the Report

1. This report outlines the work underway to review and reconfigure older people's care and support services to enable people to remain living independently in their own home for as long as possible.
2. The report seeks approval to extend the existing Home Care contracts and the Supporting People funded contracts with providers of older people's support services for a period up to 12 months from 1 April 2013 to 31 March 2014 to enable the review to be completed and for the services to be commissioned.

Information and Advice

Home-based care services

3. In April 2008, 30 home care agencies were commissioned to deliver home care services from April 2009. The contracts were awarded for an initial two year period with an option to extend for up to a further two years. In March 2012 the Council extended the contracts and they are due to end on 31st March 2013.
4. In addition to the home care contracts, there are currently 7 separate extra care schemes within Nottinghamshire with a total of 3 home care providers delivering care services within these settings. The last tender for extra care was undertaken in 2008, these contracts are also due to be re-tendered.
5. In awarding contracts to 30 home care providers it had been anticipated that service users would have a wider choice of care services and care providers. However, there have been a number of issues which have prevented the existing service providers being able to fully meet the council's requirements, particularly in consistently having availability of services in a timely manner in some rural areas of the county.

6. A review has been underway to consider the best options for future commissioning in order to address the above issues and at the same time to meet the growing demand for services arising from demographic pressures.
7. The review has been undertaken together with staff from the Improvement Programme and from the Corporate Procurement Unit to consider how any new contracts may be configured to enable value for money.
8. The range of services included are:
 - home care, including dementia care, end of life care and jointly contracted health commissioned services
 - extra care
 - respite care (non-residential)
 - carers support services
 - low level preventative housing-related support services for older people
 - social inclusion activities
 - 24/7 urgent care and crisis/rapid response
 - 24/7 social care response to telecare.
9. The review includes assessing future electronic monitoring. The current system is Info Care and there are now new systems on the market which are more efficient and can reduce administration costs.

Older People's Supporting People funded services

10. The Council currently commissions support services in sheltered housing schemes including warden aided services and community alarm services. The Council meeting on the 30th June 2011 Members approved a change in focus from long-term tenancy support and community alarms services to short-term and housing-related support to enable older people to live independently and to prevent them from requiring long-term support.
11. In order to allow sufficient time to change the focus of the older people's services in April 2011, new revised contracts were issued to the existing older person's housing-related support service providers, for a 12 month period with the option to extend for a further 12 months. The purpose of these interim contracts was:
 - to enable the Council to plan the new range of services to be commissioned
 - for consultation to be undertaken on the proposed new services
 - to give the existing providers sufficient time to make alternative arrangements or to change the nature of their services in anticipation of their funding ceasing at the end of March 2013.
12. In planning the new prevention-focused services, consideration has been given to ensuring that these services compliment, and are part of, a whole range of support services for older people, from short-term support to meet specific needs, through to large and complex packages of care and support, with health funding where appropriate, to help and support older people to live at home for as long as possible.

13. In order to achieve the above, the intention has been to undertake the tender for the prevention-focused services at the same time as the home-based support services. It was initially anticipated that the tender would commence in the autumn of 2012 with a view to contracts being awarded in January 2013, allowing 3 month transition period for new service to be delivered from April 2013.

Current Position

14. Members are aware that as part of phase 2 of the Improvement Programme, the Council is looking at creating a Corporate Commissioning Strategy to look at better, more efficient ways of undertaking strategic commissioning across all services as part of an integrated planning approach. It is inappropriate therefore in light of the imminent changes to strategic commissioning to re-tender the above contracts at this time.

Implications of the changes

15. As a result, it is proposed that the contracts with the existing home care agencies and the providers of the Supporting People funded services be extended for a 12 month period to enable the review to be completed and the commissioning arrangements followed. If Members approve the extension of the existing contracts then this will need to be achieved in accordance with the Council's Financial Regulations and the Public Contracts Regulations 2006. The legal advice is that under the rules of contract law the Council may extend this contract with providers on any new terms as long as the providers are in agreement.

Other Options Considered

16. In order to comply with European Union Procurement Regulations in relation to the expiry date of the existing contracts, consideration had been given to seeking approval from Members to proceed with the tender earlier in the autumn with a view to awarding new contracts in January to commence in April 2013. However, this was not progressed because it is imperative that, before any tender process commences, the Council is clear about the nature and range of the services it needs to commission to meet current and future social care and health care needs of older people within Nottinghamshire.

Reason/s for Recommendation/s

17. Due consideration needs to be given to ensuring that all the new services to be commissioned best meet the needs of service users and carers, meet the needs of the Council to ensure it is able to execute its statutory duties, and also enables care and support providers sufficient time to develop the required range of services.

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.

Implications for Service Users

19. In extending the current contracts for a period of up to 12 month, service users and carers will continue to receive the services that are currently available to them. Further work will be undertaken to consult with service users and carers in relation to the new home-based support services so that they are able to contribute to and help shape the development of the service specifications.

Human Resources Implications

20. The savings and efficiencies target for the home-based support services includes reviewing and streamlining internal commissioning processes to reduce bureaucracy and to ensure that service users receive a seamless service as and where they need new services or when their needs escalate. A business process re-engineering project is well underway in relation to future internal resource requirements. This will impact on the role of service organisers, their team managers, and the relevant business support staff. A delay in the tender process will mean that more time is given to the business process re-engineering project to ensure that the department's internal resources are reconfigured to meet future needs.

Financial Implications

21. If Members approve the extension of the existing contracts with the home care providers and with the providers of the Supporting People funded services there will be a 12 month delay in the delivery of the savings and efficiencies targets aligned to these services. For the home-based support services, the savings target of £865,000 will be delivered as from April 2014 instead of April 2013. For the Supporting People funded services, the savings target of £1.5m will be delivered as from April 2014 instead of April 2013. This slippage can be funded from the supporting people reserve which was established to allow the phased delivery of efficiencies in these services.

RECOMMENDATION/S

It is recommended that:

- 1) Members note the programme of work being undertaken to review the older people's home based care and support services, including prevention-focused services
- 2) Members approve the extension of 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) Members note 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.

CAROLINE BARIA

Service Director, Joint Commissioning, Quality and Business Change

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Constitutional Comments (NAB 14/11/2012)

22. Adult Social Care and Health Committee has authority to approve the recommendation set out in this report.

Financial Comments (NDR 13/11/2012)

23. The financial implications are set out in paragraph 21 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.

1. [Response to The 2nd Consultation On Savings In Supporting People Budget](#) - Full Council – 30th June 2011.

Electoral Division(s) and Member(s) Affected

All.

ASCH74

26 November 2012

Agenda Item: 12

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>
7 January 2013			
Progress update on 2 of ASCH high governance projects	Update on biggest projects currently in progress within ASCH	Relevant Service Directors	
Update on Substance Misuse Services	To provide an update on substance misuse services within the Council.	Service Director – Personal Care and Support – Younger Adults	Tessa Diment
Future Fee Levels for Older Person Care Homes	To provide a progress report on work done to date.	Service Director – Joint Commissioning, Quality and Business Change	Paul Swift
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
Update on Supported Living Team (Mental Health Utilisation Review)	To provide an update on work of the SL team set up to support people leaving mental health rehabilitation services in hospital.	Service Director for Personal Care and Support – Younger Adults	Tessa Diment
Aiming for Excellence – Extra Care – Mansfield and Ashfield	To report on the work undertaken to look at the potential provision in the Mansfield/Ashfield area.	Service Director for Personal Care and Support – Older Adults	Paul Boyd and Cherry Dunk
CQC visit to Notts Healthcare Trust, and mental health services provided by NCC and Nottingham City Council, April 2012	To update on the outcome of the visit and the actions arising from it.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson/Rod Bliss

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
4 February 2013			
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
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

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
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	
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
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
July 2013			

<u>Report Title</u>	<u>Brief summary of agenda item</u>	<u>Lead Officer</u>	<u>Report Author</u>
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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