

Adult Social Care and Health Committee

Monday, 06 February 2017 at 10:30

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

AGENDA

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| 1 | Minutes of the last meeting held on 9 January 2017 | 5 - 8 |
| 2 | Apologies for Absence | |
| 3 | Declarations of Interests by Members and Officers:- (see note below)
(a) Disclosable Pecuniary Interests
(b) Private Interests (pecuniary and non-pecuniary) | |
| 4 | Staffing Capacity to Support Current Demands and Responsibilities in Adult Social Care | 9 - 20 |
| 5 | Maximising Income Available to the Council's Directly Provided Adult Social Care Services - Commercial Development Unit Process | 21 - 26 |
| 6 | Adult Social Care Workforce Plan - Progress Update | 27 - 54 |
| 7 | Savings and Efficiencies Update | 55 - 74 |
| 8 | Update on Extra Care Services in Nottinghamshire | 75 - 82 |
| 9 | Work Programme | 83 - 88 |

10 Exclusion of the Public

The Committee will be invited to resolve:-

“That the public be excluded for the remainder of the meeting on the grounds that the discussions are likely to involve disclosure of exempt information described in paragraph 3 of the Local Government (Access to Information) (Variation) Order 2006 and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.”

Note

If this is agreed, the public will have to leave the meeting during consideration of the following item.

11 Exempt Appendix to Item 8: Update on Extra Care Services in Nottinghamshire

- Information relating to the financial or business affairs of any particular person (including the authority holding that information);

Notes

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

Customer Services Centre 0300 500 80 80

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

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

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an

online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 9 January 2017 (commencing at 10.30 am)

Membership

Persons absent are marked with an 'A'

COUNCILLORS

Muriel Weisz (Chair)
Alan Bell (Vice-Chair)

Steve Calvert
Sybil Fielding
David Martin
Francis Purdue-Horan
Mike Pringle

Pam Skelding
Stuart Wallace
Jacky Williams
Liz Yates

OFFICERS IN ATTENDANCE

Caroline Baria, Service Director, ASCH&PP
Sue Batty, Service Director, ASCH&PP
Paul Davies, Advanced Democratic Services Officer, Resources
Jennie Kennington, Senior Executive Officer, ASCH&PP
Ainsley MacDonnell, Service Director, ASCH&PP
Paul McKay, Service Director, ASCH&PP
Jane North, Transformation Programme Director, ASCH&PP

MINUTES OF THE LAST MEETING

The minutes of the meeting held on 12 December 2016 were confirmed and signed by the Chair.

MEMBERSHIP

It was reported that Councillor Calvert had been appointed in place of Councillor Woodhead, for this meeting only.

DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS

None.

DEVELOPMENT OF A COUNTYWIDE PROMOTING INDEPENDENCE SERVICE**RESOLVED 2017/001**

- 1) That the reconfiguration of existing established posts into a single countywide Promoting Independence Service be approved.

- 2) That funding for two temporary FTE Business Support Officer (Grade 3) posts be approved, at a total annual cost of £45,638 including on-costs.

STRATEGIC UPDATE AND RECONFIGUREMENT OF THE COUNTYWIDE TRANSITIONS TEAM

During discussion, members requested a further report about performance indicators for the Transitions Team.

RESOLVED 2017/002

- 1) That the update on the relevant outcomes of the recent Special Educational Needs and Disability inspection, workload and priorities for the countywide Transitions Team be noted.
- 2) That the following posts be permanently established, with authorised car user status:
 - 1 FTE Advanced Social Work Practitioner (Band C)
 - 2 FTE Community Care Officers (Grade 5)
- 3) That a further report be presented in April with performance indicators for the Transitions Team.

ADULT SOCIAL CARE AND HEALTH – OVERVIEW OF DEVELOPMENTS

RESOLVED 2017/003

- 1) That the visit from the Chief Social Worker and follow up work undertaken as a result of her visit be noted.
- 2) That the progress made with the Social Work Health Check action plan be noted and a report be presented on the outcomes of the next health check in 2017.
- 3) That the work taking place in relation to the fees paid to care homes for older adults (Bands 4 and 5) be noted, and a report be presented to a future meeting of the committee.
- 4) That the Corporate Director, Adult Social Care, Health and Public Protection be delegated authority to complete a response to the consultation document for Supported Housing, with a task and finish group including Members to help develop the submission.

REPORT ON NATIONAL CHILDREN AND ADULT SERVICES CONFERENCE, 2-4 NOVEMBER 2016

RESOLVED 2017/004

That the report on attendance at the National Children and Adult Services Conference which took place in Manchester in November 2016 be noted.

QUALITY AND MARKET MANAGEMENT TEAM QUALITY AUDITING AND MONITORING ACTIVITY

RESOLVED 2017/005

- 1) That the update on quality auditing and monitoring activity undertaken by the Quality and Market Management Team in care services across the county be noted.
- 2) That the update on the current contract suspensions with care home providers be noted.

WORK PROGRAMME

RESOLVED: 2017/006

That the work programme be noted, subject to the addition of reports on performance indicators for the Transitions Team, and the review of care home fees.

EXCUSION OF THE PUBLIC

RESOLVED: 2017/007

That the public be excluded for the remainder of the meeting on the grounds that the discussions are likely to involve disclosure of exempt information described in paragraph 3 of the Local Government (Access to Information) (Variation) Order 2006 and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

EXEMPT APPENDIX TO ITEM 8: QUALITY AND MARKET MANAGEMENT TEAM QUALITY AUDITING AND MONITORING ACTIVITY

RESOLVED: 2017/008

That the information in the exempt appendix be noted.

The meeting closed at 12.25 pm.

CHAIR

6 February 2017**Agenda Item: 4****REPORT OF CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH
AND PUBLIC PROTECTION****STAFFING CAPACITY TO SUPPORT CURRENT DEMANDS AND
RESPONSIBILITIES IN ADULT SOCIAL CARE****Purpose of the Report**

1. The report requests approval for a range of posts in services across the department that are currently temporary. The recommendations are for either an extension of a current temporary contract, or approval to make the posts permanent.

Information and Advice

2. The report covers a range of posts that have been set up on a temporary basis to respond to new responsibilities and predicted demand as a result of legislative and demographic changes. The recommendations follow a detailed review of all posts, whereby Group Managers were required to provide business cases to demonstrate the need for the posts to undertake statutory duties and meet current and predicted demand in the department.
3. The report covers 3 categories of posts. Following review, there are posts where approval is requested to establish them on a permanent basis; others where a temporary extension to the contract is requested as managers continue to keep levels of demand under review, and a small number of additional posts. In the main, these are existing posts which will be funded by money provided on a national basis to Councils for implementation of the Care Act, so there is no additional funding requirement. For a small number of posts the funding is provided by Health or external grant funding.
4. A number of the posts were last presented to the Committee for approval in a report on the requirements of the Care Act in April 2016. The Committee is now asked to approve the following posts on a permanent basis, from 1st April 2017:
 - **Senior Practitioner in Adult Care Financial Services**, 1 FTE (full-time equivalent) post (Band C), at a cost of £50,780 p.a. This post was initially required on a temporary basis to support the significantly increased workload of the team, especially in light of the Care Act requirements. The work of the team continues to grow and is unlikely to reduce, hence the request for the permanent post.

- **Direct Payments Auditor Posts in Adult Care Financial Services**, 2 FTE posts (Grade 4) at a cost of £54,111 p.a. These posts were established to enable the Council to complete audits of individual services users' Direct Payments where they had amounted funds in their Direct Payment Account over a period of time which for one reason or another had not been used for their care and support. It was anticipated that the posts would only be required on a temporary basis following the recommendation of Internal Audit in relation to the suspension of a Direct Payments Support Provider, DiPSU, in 2015/16. However, the audits have enabled the Council to identify and recoup significant unspent funds from service users' Direct Payment Accounts. It has become increasingly evident that there will always be a significant number of people who will not at times spend their full Direct Payment allocation due to various circumstances, such as not being able to cover periods when their Personal Assistant (PA) is on annual leave or sick leave, or due to a delay in appointing a new PA or replacing a PA that has left the role. The Council has set new savings targets over the next 3-4 years relating to one-off Direct Payments recoups. These posts are essential in enabling the savings to be realised.
- **Senior Practitioner with responsibility for prisons in Nottinghamshire**, 1 FTE post (Band C) at a cost of £50,780 p.a. This post was set up to respond to the new responsibilities for local authorities identified in the Care Act 2014 in relation to the assessment and provision of social care support for prisoners. From review of the work required and undertaken it has become evident that a permanent post at Senior Practitioner level is required. The post holder requires the capability to assess complex needs from across all service user groups, including forensic specialities. This post also requires a high degree of strategic working across the county, with links to the prison services and health providers to manage the contracts for the provision of services. It also requires the post-holder to develop relationships and systems to support the provision of care and support in prisons. Further information on the work undertaken with prisons to date is provided later in the report.
- **Strategic Commissioning Officer**, 1 FTE post (Band C) at a cost of £50,780 p.a. This post initially focused on the development, promotion and maintenance of the Nottinghamshire Help Yourself (NHYS) online directory. The maintenance of the NHYS directory is a key element of the Council's duty of prevention, to provide information and advice on care and support to the public. The role has now been extended to meet the wider requirements of the Care Act in relation to prevention and in implementing the Adult Social Care Strategy, and therefore the request is for a permanent post.

5. In addition to this there were a number of posts also approved by the Committee in April 2016 where an extension of the current contract is requested, from 1st April 2017:

- **Community Care Officers in the county wide reviewing teams** – 7 FTE posts (Grade 5) at a cost of £223,661 p.a. As the Committee will be aware from previous reports on assessment and reviewing activity in the department, this is an area where increased staffing capacity is required to respond to the statutory responsibilities outlined in the Care Act. Approval is requested for the posts to be extended to 31st March 2018.

- **Social Worker** - 1 FTE post (Band B) at a cost of £44,634 p.a. to undertake assessments/reviews and support people into alternative placements during the closure of the Care and Support Centres. The original resource of one Social Worker and one Community Care Officer (CCO) was agreed until March 2017, however, following consultation the programme was extended until March 2018, hence the extension of one post is required.
6. One of the posts approved by the Committee in April 2016 was a 0.5 FTE Team Manager post in the Gedling Community Mental Health Team. In order to undertake the duties required this post is now required on a full-time basis. To fund the additional costs it is proposed that a vacant 0.5 FTE Advanced Social Worker post in the Broxtowe, Gedling and Rushcliffe Physical Disability Team is dis-established and the short fall of approximately £2,000 p.a. will be funded by the Care Act funding.
7. The following posts were originally presented for approval on a temporary basis across a number of Committee reports, and further to review approval for funding on a permanent basis is now requested:
- **Younger Adults' Team Manager**, 1 FTE post (Band D) at a cost of £54,476 p.a. This post was set up to work on a countywide basis in order to respond to pressures in services for younger adults, and to support the introduction of new ways of working. The post has worked well and has provided much needed additional management capacity for the service. Analysis has shown that the significant increasing demand for complex assessments requiring management oversight, such as safeguarding, is continuing. This is in addition to a sustained high volume of transformational work that requires changes in the way operational teams work to deliver existing savings targets across younger adults' services. The post is therefore required on a permanent basis with effect from 1st April 2017
 - **Community Care Officer, Mansfield and Ashfield**, 1 FTE (Grade 5) at a cost of £31,952 p.a. with effect from 1st April 2017. This is one of two posts created on a temporary basis to meet increasing high levels of demand in this locality. Due to the continuing increase in referrals, one post is required on a permanent basis, in order to avoid people having to wait for assessments.
 - **Community Care Officer, Newark and Bassetlaw**, 1 FTE (Grade 5) at a cost of £31,952 p.a. with effect from 1st April 2017. This post is required to enable social care to engage in the decision-making process as to whether a person is eligible for part or full funding of their care package from health, through the Continuing Health Care (CHC) assessment process. Due to the increasing high numbers of assessments required, the temporary post has enabled sufficient capacity for social care to attend assessment meetings. This has increased the number of people appropriately receiving CHC funding and it is therefore recommended that the post is established on a permanent basis.
 - **Assistive Technology Manager**, 1 FTE post, (Band D) at a cost of £54,476 p.a. with effect from 1st April 2017
 - **Assistive Technology Advisor**, 1 FTE post, (Grade 4) at a cost of £27,055 p.a. with effect from 1st April 2017

These two posts manage the various components that deliver the Council's Assistive Technology service. Without the posts, the Council would not be able to provide technology to support people to live as independently as possible, avoiding the need for more costly forms of support. This includes a range of monitors and sensors that can detect people's movements and if they detect potential danger, send an alarm to a carer or call centre to enable a response. To date the posts have been funded on a temporary basis as they have been linked to savings proposals. Assistive Technology is now a core part of the Adult Social Care Strategy and the Council's social care offer and therefore funding is requested on a permanent basis.

- **Advanced Social Work Practitioner (Newark)**, 0.5 FTE post (Band C) at a cost of £25,390 p.a. with effect from 1st April 2017
- **Advanced Social Work Practitioner (Bassetlaw Hospital)**, 0.5 FTE post, (Band C) at a cost of £25,390 p.a. with effect from 1st April 2017
- **Advanced Social Work Practitioner (Newark Hospital)**, 1 FTE post, (Band C) – this post is to be established as a result of the dis-establishment of 1 FTE Social Worker post with a net additional cost of £5,000 p.a., with effect from 1st April 2017.
- **Advanced Social Work Practitioner (Bassetlaw Older Adults)**, 1 FTE post (Band C) at a cost of £50,780 p.a. with effect from 1st April 2017

One full-time and two part-time Advanced Social Work Practitioner posts were established in order to strengthen management capacity relevant to additional posts recruited to in order to manage the increased work resulting from the Care Act, including the growing demand for complex assessments, case work and safeguarding referrals in older people services. A review of reporting responsibilities has confirmed that these are required on a permanent basis. It is also necessary to convert one social worker post permanently into a senior practitioner post for the same reason.

- **Advanced Social Work Practitioner (King's Mill Hospital)**, 1 FTE post (Band C) at a cost of £50,780 p.a. with effect from 1st April 2017
- **Community Care Officer**, 1 FTE post (Grade 5) at a cost of £31,952 p.a. with effect from 1st April 2017

These two social care posts support the discharge of people over the weekend at King's Mill Hospital. The benefits of the posts in supporting and expediting discharges has been evidenced and are now part of the regular pattern of services. The posts are funded by Health.

8. The following posts were originally presented for approval across a number of Committee reports, and further to review approval for an extension to the current contract is now requested:

- **Countywide Reviewing Team Manager**, 1 FTE post (Band D), at a cost of £54,476 p.a. This post is required to support the work of the reviewing teams and to manage the additional 7 FTE temporary Community Care Officers outlined in **paragraph 4**. In

addition to this the post has lead responsibility for social work recruitment and oversight of the supply register. Approval is requested for the post to be extended to 31st March 2018.

- **Business Support Officer (Social Work recruitment)**, 1 FTE post (Grade 3) for a 3 month period and then 0.5 FTE post for a 12 month period, at a cost of £17,114 in total. This post supports the work mentioned above in relation to a department-wide approach to the recruitment of social work staff and the maintenance of the supply register for social care staff. Approval is requested for the 1 FTE post to be extended from 1st January to 31st March 2017, and the 0.5 FTE post to be extended to 31st March 2018, with effect from 1st April 2017.
- **Commissioning Officer, Multi-Agency Safeguarding Hub**, 1 FTE post (Band C) at a cost of £50,780 p.a. Adult safeguarding continues to be an area of increased demand and requires targeted service development. As a result of the new statutory duty in the Care Act regarding adult safeguarding, including the widening definitions of safeguarding to include self-neglect, and controlling and coercive behaviour and due to the continuing increased awareness of safeguarding issues, there is a significant amount of strategic work required to enhance the department's response to adult safeguarding matters. Approval is requested for the post to be extended to 31st March 2020, with effect from 1st April 2017.
- **Extra Care Project Manager**, 1 FTE post (Band B) at a cost of £44,634 p.a. This post is required to continue to support the development of Extra Care housing across the County. Temporary resources provided by the corporate Programmes and Projects Team have now ceased, but the work programme to develop Extra Care as a cost effective alternative to residential care continues into 2018/19. Extra Care is a major part of the Living At Home savings project, which is on track to meet £927,000 of its overall savings target of £952,000 between 2015/16 and 2016/17, with the remaining £25,000 to be delivered in 2018/19. Approval is requested for this post to be funded until 31st March 2018.
- **Deprivation of Liberty Safeguards (DoLS) Strategic Development Manager**, 1 FTE post (Band D) at a cost of £54,476 p.a. As the Committee will be aware from regular update reports, there is an ongoing programme of work to manage the increased number of referrals, assessments and reviews required in relation to DoLS. Further changes to the DoLS service are likely following the outcome of the review of DoLS legislation by the Law Commission. This was expected to be announced in December 2016, prior to going forward for parliamentary approval, but has been delayed and is now expected later in 2017. Approval is requested for this post to be extended to 31st March 2018.

Occupational Therapy (OT) Service

9. Temporary funding has been approved across a number of Committee reports for aspects of the Occupational Therapy service. Following review the following temporary posts are requested to be extended or established:

- **Principal Occupational Therapy post**, 1 FTE post for two years at a cost of £54,476 p.a (Band D, pending job evaluation). The post will take a strategic lead for the

development of the Occupational Therapy Service moving the service forward in the context of the Adult Social Care Strategy and integrated ways of working with health and district councils. The role will also develop a quality assurance system, career progression policy and workforce plan for OTs, as well as identify and manage new ways of making the service more efficient or contributing to savings through the prevention agenda.

The establishment of this post is recommended following review of the work required with the existing temporary Occupational Therapy Project Manager post ending in March 2017 and combines aspects of work that require picking up from this role with new areas of need. Once this initial work is completed the aim is for the permanent Principal Social Worker role to be able to maintain the relevant aspects of the work on an on-going basis. Approval is requested to establish this post until 31st March 2019, with effect from 1st April 2017.

- **Temporary Occupational Therapy posts**, 3 FTE posts, (Band B) at a total cost (including on-costs) of £133,903. These posts have been working on implementing a project which safely uses equipment that enables one member of home care staff to manage transferring people rather than two. Full year effect savings of £371,230 have been achieved through reviews undertaken between January and November 2016. In addition, there has been cost-avoidance from prevention cases. Three of the 3.5 temporary posts require extending to complete the reviews and enable learning to be embedded as mainstream practice across social care and provider agencies. Approval is requested for these posts to be extended to 31st March 2018, from 1st April 2017.

10. In addition to the posts listed above, 1 FTE supernumerary Occupational Therapist post (Band C) is required at a cost of £50,780 p.a. This post is required due to a complex HR issue and is requested until 31st March 2018, with effect from 1st April 2017.

Establishment of care staff to support prisoners with social care needs

11. The Care Act 2014 places responsibility for the assessment of social care needs in the prison population with the local authority where the prison is situated. This responsibility also includes the delivery of care to meet that need. This responsibility became a statutory duty from April 2015.
12. This report has already referred to the Senior Practitioner post with responsibility for prisons in **paragraph 4**. The Council has responsibility for 3 prisons: HMP Whatton, HMP Lowdham Grange and HMP Ranby with capacity to house 2,799 prisoners across the 3 sites. The Senior Practitioner post has been responsible for assessing the needs of prisoners whilst in custody and when due for release and ensuring services are provided for those who are assessed as having eligible needs. This has also required overseeing and working with Occupational Therapists and the Adult Deaf and Visual Impairment Service, including developing appropriate risk assessments and training.
13. The post holder has also been responsible for providing information and training to prisoners, prison staff and healthcare staff with regards to social care and the national eligibility criteria, as well as developing effective referral processes.

14. Work has been undertaken to establish effective strategic and working relationships with prison and healthcare staff at each site, and to liaise with the Carers Federation who deliver the Social Care Advocates scheme (prisoners who support other prisoners with low level social care needs) at HMP Whatton. The post holder is required to attend appropriate meetings within the prison and to represent the Council at local and national events around social work in prisons, including the ADASS Care and Justice Network.
15. The Senior Practitioner also works closely with Offender Management and Probation services, and provides reports to inform the parole board and other appropriate agencies in complex cases with high levels of risk. The role also involves the need to liaise closely with other local authorities when prisoners are being moved or released across council boundaries.
16. The Committee is also asked to approve the establishment of 4 FTE Care Assistant posts (Grade 2) (Living Wage Allowance payable) for 18 months to provide support and re-ablement to prisoners at HMP Lowdham Grange and HMP Ranby. Prior to the Care Act these requirements for ad-hoc support has been provided by prison staff, prisoner peers and healthcare staff.
17. The care staff will be based from the Council's Care and Support Centres for 18 months from 1st April 2017 to 31st October 2018. In line with the Adult Social Care Strategy, the staff will be trained to provide re-ablement support. They will only provide care and support in prisons when required. At all other times they will work in the Care and Support Centres to provide re-ablement to individuals placed for short-term assessment. This will enhance the service already in place and also reduce the need for agency staff.
18. The total cost of the temporary posts will be £108,000 and this will also be funded from the Care Act funding.

Integrated Personal Commissioning – post to be hosted by the County Council

19. Within the Sustainability and Transformation Plan (STP), Nottinghamshire was successful in a bid to become an early adopter of Integrated Personal Commissioning (IPC). IPC is one of the pillars of the Five Year Forward View. It supports the improvement, integration and personalisation of services, building on learning from personal budgets in social care and driving bold expansion plans for personal health budgets.
20. IPC will be adopted as the operating model for people with complex needs across health and social care in Nottinghamshire. It requires health and social care to introduce IPC at pace and scale, cohort by cohort – with goals to scale personalised care planning to 1% of the population, and personal budgets with NHS funding to a minimum 1 in a 1000 by March 2018.
21. A Project Manager has been appointed on behalf of Mid-Nottinghamshire and Greater Nottingham planning units. A 1 FTE Project Officer (Band B) is required to support the Project Manager to undertake tasks to deliver and drive this project forward. It is proposed that the Project Officer is hosted by Nottinghamshire County Council to support this partnership working for a period of 12 months from the date of appointment. This

post will be funded by the grant provided for the implementation of the IPC and held by Rushcliffe Clinical Commissioning Group (CCG).

22. Approval is requested for 1 FTE Project Officer post to be hosted by the Council, for 12 months from the appointment date. The cost of the post is £46,882 p.a., (with costs for a computer and phone included) and will be met in full by the IPC grant held by Rushcliffe CCG.

Other Options Considered

23. The posts listed in the report have all been subject to consideration and review by Senior and Group Managers within the department in terms of whether they are still required, whether a contract extension is sufficient to meet the current and predicted need, or whether they are now required on a permanent basis. As a result of this review process it has been agreed to remove some temporary posts, where the work can be taken forward by existing staff or where need for the post no longer exists.

Reason/s for Recommendation/s

24. The Committee is asked to approve the posts in the report as the review undertaken in the department has indicated that they are required to undertake essential and statutory duties, as well as transformational work needed to support implementation of the Adult Social Care Strategy and savings and efficiencies.

Statutory and Policy Implications

25. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working 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

26. The funding provided to the Council to support the implementation of the Care Act was £4.43m. The posts will be funded from this with the exception of the posts that are funded by Health and an external grant (Advanced Social Work Practitioner and Community Care Officer, King's Mill Hospital, and Project Officer, Integrated Personal Commissioning).

Human Resources Implications (SJ 11/01/17)

27. The implications are identified alongside information about the specific posts, where applicable.
28. Comments also received from Unison: 'Unison agrees with making so many posts in this report permanent. We would ask the committee to also consider making the 7 CCO posts in point 5 permanent, or at least a longer fixed term contract to the one proposed given the volume of the work needed to be undertaken in this role. We would also like to

acknowledge the difficult circumstances that exist in our department at the moment and appreciate that the authority are trying to provide a quality service with a reduced budget and increasing demands on social care, with no end in sight.'

Safeguarding of Children and Adults at Risk Implications

29. A number of the posts requested for approval have duties relating to the safeguarding of adults, which became a statutory duty for local authorities in the Care Act 2014.

Implications for Service Users

30. The posts requested for approval are all required to fulfil statutory duties or to support the transformation of service delivery and achieve the required savings.

RECOMMENDATION/S

- 1) That the Committee approves the posts identified in the report, and summarised in brief in the table below.

Post	Cost	Number and status of post	Extension date or permanent
Senior Practitioner in Adult Care Financial Services	£50,780 p.a.	1 FTE	Permanent
Direct Payments Auditor Posts in Adult Care Financial Services	£54,111 p.a.	2 FTE	Permanent
Senior Practitioner with responsibility for prisons in Nottinghamshire	£50,780 p.a.	1 FTE	Permanent
Strategic Commissioning Officer	£50,780 p.a.	1 FTE	Permanent
Community Care Officers in the county wide reviewing teams	£223,661 p.a.	7 FTE	Temporary to 31 st March 2018
Social Worker (Care and Support Centres)	£44,634 p.a.	1 FTE	Temporary to 31 st March 2018
Team Manager, Gedling Community Mental Health Team	£2,000 p.a.	1 FTE (currently 0.5 FTE – to be made 1 FTE through dis-establishment of 0.5 FTE Advanced Social Work Practitioner post)	Permanent
Younger Adults' Team Manager	£54,476 p.a.	1 FTE	Permanent
Community Care Officer, Mansfield and Ashfield	£31,952 p.a.	1 FTE	Permanent
Community Care Officer, Newark and Bassetlaw	£31,952 p.a.	1 FTE	Permanent
Assistive Technology Manager	£54,476 p.a.	1 FTE	Permanent
Assistive Technology Advisor	£27,055 p.a.	1 FTE	Permanent
Advanced Social Work Practitioner (Newark)	£25,390 p.a.	0.5 FTE	Permanent

Advanced Social Work Practitioner (Bassetlaw Hospital)	£25,390 p.a.	0.5 FTE	Permanent
Advanced Social Work Practitioner (Bassetlaw Older Adults)	£50,780 p.a.	1 FTE	Permanent
Advanced Social Work Practitioner (Newark Hospital)	£5,000 p.a.	1 FTE (post established following dis-establishment of 1 FTE Social Worker post)	Permanent
Advanced Social Work Practitioner (King's Mill Hospital)	£50,780 p.a. (funded by Health)	1 FTE	Permanent
Community Care Officer	£31,952 p.a. (funded by Health)	1 FTE	Permanent
Countywide Reviewing Team Manager	£54,476 p.a.	1 FTE	Temporary to 31 st March 2018
Business Support Officer (social work recruitment)	£17,114 (total)	0.5 FTE (plus 3 months at 1 FTE)	Temporary to 31 st March 2018
Commissioning Officer, Multi-Agency Safeguarding Hub	£50,780 p.a.	1 FTE	Temporary to 31 st March 2020
Extra Care Project Manager	£44,634 p.a.	1 FTE	Temporary to 31 st March 2018
DoLS Strategic Development Manager	£54,476 p.a.	1 FTE	Temporary to 31 st March 2018
Principal Occupational Therapy post	£54,476 p.a.	1 FTE	Temporary to 31 st March 2019
Occupational Therapy posts	£133,903 (total)	3 FTE	Temporary to 31 st March 2018
Supernumerary Occupational Therapist post	£50,780 p.a.	1 FTE	Temporary to 31 st March 2018
Care Assistant posts	£108,000 (total)	4 FTE	Temporary to 31 st October 2018
Project Officer, Integrated Personal Commissioning (IPC)	£46,882 p.a. (funded by IPC grant)	1 FTE	Temporary for 12 months from date of appointment

David Pearson CBE
Corporate Director, Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

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Constitutional Comments (LM 25/01/17)

31. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 11/01/17)

32. The financial implications are contained within paragraph 26 of the report.

Background Papers and Published Documents

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.

Care Act 2014 – extension of essential posts – report to Adult Social Care and Health Committee on 18 April 2016.

Electoral Division(s) and Member(s) Affected

All.

ASCH451

6 February 2016**Agenda Item: 5****REPORT OF THE SERVICE DIRECTOR FOR NORTH NOTTINGHAMSHIRE
AND DIRECT SERVICES****MAXIMISING INCOME AVAILABLE TO THE COUNCIL'S DIRECTLY
PROVIDED ADULT SOCIAL CARE SERVICES – COMMERCIAL
DEVELOPMENT UNIT PROCESS****Purpose of the Report**

1. To provide an update on the proposal to maximise income in directly provided social care services and set out the intention to engage in the Commercial Development Unit programme for 2017.
2. To seek Committee approval to disestablish the full-time temporary Development Officer post previously approved by Adult Social Care and Health (ASCH) Committee in October 2016.

Information and Advice

3. In October 2016, a report was presented to Committee which set out a proposal to maximise the income available to the Council's directly provided social care services and sought approval for the establishment of a full-time temporary Development Officer post for an initial period of 1 year with potential extension for a further year, subject to review.
4. However, subsequent to this in November 2016, Policy Committee approved a recommendation to continue commercial development support to services for the next two years via the Commercial Development Unit.
5. This means that service areas should not employ their own commercial resources but should instead utilise the support of the Commercial Development Unit. The Council is therefore currently unable to recruit to the Development Officer post previously requested.
6. In order to progress the income maximisation work, Direct Services will engage with the support offered by the Commercial Development Unit, although inclusion in the process will not give the Council any additional staffing capacity to undertake the commercial work required to deliver the income maximisation targets previously agreed of £60,000 in 2017/18 and £70,000 in 2018/19.

7. The Commercial Development Unit will be able to support up to nine services each year and following discussion with commercial colleagues, Brooke Farm has been put forward as an area of commercial potential, in line with the original proposal to maximise income. Brooke Farm is a farm shop and horticultural services commercial operation that provides work and training opportunities for a range of service users with different needs with the aim of preparing them for work outside of the service.
8. The inclusion of Brooke Farm in the next tranche of the Commercial Development Unit process, was approved by Policy Committee on 18th January 2017.

The Commercial Development Unit Process

9. Following approval by Policy Committee, services go into an 8-week intensive discovery phase that helps them to build a full business case for their commercial proposal which is then scrutinised by a panel consisting of the Chief Executive, the Monitoring Officer and the Section 151 officer. They then make a recommendation to Policy Committee so that a decision can be made as to whether the business case should be taken forward.
10. Regular progress reports would then be brought back to the relevant service committee for any areas that receive the go-ahead to implement their commercial plans.
11. Whilst service leads are experts in their own fields, they may lack the confidence or commercial acumen to develop full business plans. The Commercial Development Unit delivers an accelerated learning programme to supply the necessary skills that the service needs.
12. Services are also supported in regular 1-1 sessions as they apply learning to build a robust business case that includes their income and cost projections for the next four years. The intention is to get as many services as possible to a position of zero cost or, ideally, to a position where they are returning an income to the authority which could be used to support other areas.
13. Services that pass the 8-week gateway test are then supported and monitored for the following year as they start to trade during an “incubation” phase. Early interventions will be made where any services fail to meet income or cost projections.
14. It is important to note that the process is intensive and requires a significant time and work commitment from the service’s management team. Individuals, including the Service Director for Direct Services, have been identified to undertake the programme during February and March.
15. Any seed investment for the commercial plans would come from an earmarked reserve of £0.5m in the Strategic Development Fund.

Services recommended for inclusion in the Commercial Development Unit

16. Brooke Farm has been recommended as potentially benefitting from going through the Commercial Development Unit process, with a focus on generating further income from produce and plant sales, events and gardening services as well as identifying any new opportunities.

Other Options Considered

17. As set out in **paragraph 2**, approval was previously sought for the establishment of a full-time temporary Development Officer post. This is no longer viable in light of the subsequent Policy Committee decision and it is recommended that the post be disestablished.
18. To not pursue commercial opportunities would mean that the expected savings over the next two years would need to be met through efficiencies elsewhere in the service.

Reason/s for Recommendation/s

19. In order for Direct Services to reduce the Council subsidy and be more sustainable in the future, it is necessary to take a more commercial focus and identify opportunities for new business and income generation. Participation in the Commercial Development Unit process will support this.
20. Disestablishment of the Development Officer post is in line with the November 2016 Policy Committee decision.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working 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

22. These are contained within the body of this report.

Human Resources Implications

23. The post of Development Officer was not recruited to but requires Committee to formally disestablish the post; any further HR Implications arising from the proposal will be identified in future reports.

Public Sector Equality Duties Implications

24. Depending on the nature of the individual income maximising initiatives, as work to explore them in more detail commences, consideration will be given to the necessity to complete Equality Impact Assessments on a case by case basis.

Safeguarding of Children and Adults at Risk Implications

25. The inclusion of Brooke Farm in the commercial development process will not in itself present any additional risks to vulnerable adults attending or working in the service. Any business development opportunities arising from the process will be risk assessed with regards to the individuals involved.

Implications for Service Users

26. It is hoped that any further business opportunities within Brooke Farm will lead to greater skills, training and employment opportunities for service users.

Ways of Working Implications

27. At this stage, there are no identified ways of working implications, however consideration will be given to this as future business plans for the service emerge as a result of the commercial development process.

RECOMMENDATION/S

That the Committee:

- 1) notes the update on the proposal to maximise income in directly provided social care services.
- 2) notes the planned engagement in the Commercial Development Unit process as a means of maximising incomes in Direct Services.
- 3) approves the disestablishment of the full-time temporary Development Officer post previously approved by Adult Social Care and Health Committee in October 2016.

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Constitutional Comments (LM 20/01/17)

28. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 23/01/17)

29. The disestablishment of the post will save the Council money although if the increased income does not materialise, this will more than offset the savings.

Background Papers and Published Documents

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.

Savings and efficiencies update and proposal to maximise the income available to the Council's directly provided adult social care services – report to Adult Social Care & Health Committee on 10 October 2016

Commercial Development Unit - report to Policy Committee on 16 November 2016

Commercial Development Unit – report to Policy Committee on 18 January 2017

Electoral Division(s) and Member(s) Affected

All.

ASCH454

6 February 2017**Agenda Item: 6****REPORT OF THE SERVICE DIRECTOR, MID NOTTINGHAMSHIRE****ADULT SOCIAL CARE WORKFORCE PLAN – PROGRESS UPDATE****Purpose of the Report**

1. To update Committee on the progress made by the Workforce Delivery Group with the development and delivery of the Departmental Workforce Plan and to provide information on the next steps to deliver the plan's objectives.
2. To seek approval for the establishment of an externally funded, temporary (six months) full-time equivalent (FTE) Project Officer (Band B) post.

Information and Advice**National context**

3. A national report on [The state of the Adult Social Care sector and workforce in England](#).¹ was published in March 2015. This report looks at the whole social care workforce across all sectors, including not for profit, private, public and people employed as personal assistants. The national profile reflects the workforce profile in Nottinghamshire; it is predominantly white, predominantly female and aging. Nationally, 1 in 5 workers in social care are over the age of 55 years. Turnover of staff is also identified as an important issue nationally, with around 300,000 (25.4%) of the workforce leaving their posts each year. Turnover is higher amongst workers in the private sector and those who work for domiciliary care providers.
4. In May 2014, the LGA published [The Standards for Employers of Social Workers in England](#). These standards relate specifically to all registered social workers employed within an organisation, as well as managers and social work students; Standard 2 calls for effective workforce planning to '*make sure that the right number of social workers, with the right level of skills and experience, are available to meet current and future service demands*'.²
5. Workforce planning is a key component of the local Sustainability and Transformation Plans (STP), submitted to NHS England in October 2016. STPs set out how local health and care services will work together to improve the quality of care, their population's health and wellbeing and close the financial gap. Within agreed planning footprints, commissioners and providers in Health and Social Care are required to work together

¹ The state of the adult social care sector and workforce in England, Skills for Care, March 2015, page 36

² The Standards for employers of Social Workers in England, LGA, May 2014, page 6

alongside other key stakeholders, to develop and implement plans to close gaps in the areas of health and wellbeing, care and quality and finance and efficiency, within five years.

6. Two STP footprints cover Nottinghamshire County Council boundaries: Nottingham and Nottinghamshire, South Yorkshire and Bassetlaw. The plans include work to map the existing local health and social care workforce, identify current and future workforce issues and skill gaps, as well as model and implement plans to ensure an appropriately skilled workforce for the future.
7. In May 2016 the Council approved a revised Corporate Workforce Strategy 2016-2018. This provides the ambition and framework to enable Nottinghamshire County Council to be a high performance organisation with a culture that engages and develops its staff to support them to be the best they can be and achieve continuous improvement.
8. In order to support the delivery of the Adult Transformation Portfolio and to embed further the Adult Social Care (ASC) Strategy, it was agreed that a more detailed Adult Social Care Workforce Strategy and plan was required to sit under the Corporate plan. An Adult Social Care Workforce Delivery Group was therefore established in March 2016, which is chaired by the Service Director for Mid Nottinghamshire. Its purpose is to develop, implement and monitor a revised workforce plan for the Department.
9. This Workforce Delivery Group has also been involved in the development of the workforce development workstream for the Nottingham and Nottinghamshire STP, of which Bassetlaw is an associate. The Chair of the Delivery Group represents the department on the STP Transformation Workforce Delivery Group. This group is working towards a collaborative approach across Nottinghamshire to identify and address workforce issues across all partners in the local system.
10. In order to provide additional resources to complete the Departmental plan and engage in the STP workstream, a Project Manager was seconded from the Workforce Planning and Organisational Development Team. The Project Manager facilitates and co-ordinates input from a wide range of Corporate and Departmental colleagues.
11. Six key Departmental workforce priorities have been identified:-
 - to develop and maintain accurate and relevant workforce intelligence data
 - to identify the knowledge, behaviours, skills and capabilities required by the workforce to support culture change
 - to equip and support Team Managers to embed the Adult Social Care strategy
 - to develop and maintain the ability to recruit and induct sufficient staff with appropriate qualifications, skills and experience and to ensure that they understand and can deliver the ASC strategy
 - to develop career pathways for social care roles
 - to implement the above objectives within the context of increasingly integrated working and joint workforce plans (through the STP workstreams).
12. The Adult Social Care departmental action plan also addresses issues raised through the ASCH Workforce Healthcheck in June 2015. Progress updates are reported to the departmental Joint Consultative and Negotiating Panel (JCNP) as required and the Trade

Unions have been involved and are supportive of the Workforce Plan. The Workforce Plan is attached as **Appendix A**.

Key Workforce Priorities – Progress to Date

13. In addition to employee surveys, a number of workforce engagement events have taken place throughout the year. A large number of the issues identified at the various engagement events echo the results of the Employee Health Check Survey and in the main, shaped the workforce action plan.
14. The key areas of work undertaken over the past few months have been:
 - **Data analysis** of the current workforce in order to identify priority areas on which to focus when succession planning. For example, demographic analysis has revealed that a significant proportion of the workforce is within or close to the age range at which retirement is an option for them.
 - **Developing the required workforce skills set against the changes to pensions:** changes introduced from April 2015 have given staff aged 55 years additional freedom as to how they may use their pension pots and receive their benefits. This means that potentially such staff may decide that they want to retire earlier, which could have an adverse impact on the skills, knowledge and experience which the Department has at its disposal.
 - **Enabling Effective Cultural Change:** considerable work has taken place to engage and embed the key strategy messages with staff. There have been workshops for frontline staff to promote changes in practice and behaviour and to equip them with the requisite skills. In addition, the Adult Social Care Transformation Team produces a weekly news e-bulletin to ensure that all staff receive the key messages on changes and continuous improvements at the same time.
 - **Team Managers' Development Programme:** this was designed to support Team Managers to manage the changes required to embed the ASC Strategy across operational teams. Working closely with Team Managers, a bespoke development programme has been created, entitled 'New Ways to Better Outcomes for All'. The programme is being delivered by both external and internal trainers and started on 14 September 2016. To date, the 54 managers have completed Day 4 of the 7-day training programme and have provided positive feedback on the outcomes of the training sessions as a supportive intervention to equip them to embed the ASC Strategy, share learning and reflect on their practice and management skills. The 7-day training schedule includes:-

Day 1: Sept	Engaging with the ASC strategy and addressing the highs and lows of implementing the challenge
Day 2: Oct	Inspiring leadership - delivering results
Day 3: Nov	Enabling my team to support plan effectively
Day 4: Dec	Dealing with difficult conversations
Day 5: Jan	'Where does all my time go?' - Becoming more efficient and effective
Day 6: Feb	HR impact/managing staff remotely/using information to

	manage teams
Day 7: Feb	Delivering results, reflection and next step planning

- **A central recruitment campaign** was established to manage the high level of vacancies in the Department which reached a high of 100 in May 2016 due to the need to recruit staff to deliver the additional duties associated with the Care Act. The campaign comprised central co-ordination of advertising and recruiting, media campaigns and a refresh of the Department's supply register. Between November 2015 and December 2016, 109 posts have been filled throughout the County as a result of that campaign. There has been progress made with the centralised recruitment activities for Social Workers and Community Care Officers, combined with the development of activities targeting key skill shortages such as Approved Mental Health Practitioners (AMHPs), Best Interests Assessors (BIAs) and succession planning.
- **A department eLearning induction programme** has been developed to engage staff in the ASC Strategy and to deliver a departmental overview for use in the induction of new staff. The programme was launched on 13th October 2016 and 40 staff have accessed it since then. The induction programme builds on the Corporate Induction programme but it is bespoke to the department and specifically covers the current changes and challenges that are faced. The package is aimed at new starters as well as existing staff to ensure a consistent level of understanding and knowledge across the workforce. The link to the programme is as follows:
<http://nottsccl.learningpool.com/course/view.php?id=88>
- **A Training Needs Analysis** for staff was undertaken and the results of the analysis will be included in the development of core training modules which will support the need for maintaining and increasing knowledge and skills.
- **A clear career pathway** has been developed for Social Workers to support recruitment and career development. Work is under way to develop similar career pathways for Occupational Therapists and Community Care Officers. The Social Workers career pathway is attached as **Appendix B**.

Next steps

15. The Department's workforce plan is developing well, with particular success in the delivery of Team Manager training, the e-learning induction programme, the career pathway for social workers and the recruitment of staff. Whilst work against these priorities will continue to build on this early success, the focus will increasingly shift to supporting the delivery of integrated working and developing inter-agency workforce planning via the STP.
16. This work will aim to ensure that strategic workforce plans include the social care workforce and also reflect the strengths, values and principles of social care. The five Nottingham and Nottinghamshire STP workforce strategy priority areas are:
 - Developing and embedding a Systematic Approach to Prevention and Promoting Independence

- Developing a Population/Place-based Approach to workforce redesign
 - Building capacity, capability and resilience in the primary care workforce
 - Supporting System Effectiveness through organisational development
 - Development of Collaborative Human Resources Solutions.
17. Initial workforce modelling is concentrating on partners using a specific workforce modelling tool to co-produce the skills and competencies required to deliver the future STP vision in the priority areas of urgent and pro-active care. As part of this work, it has been identified that there is the need to evaluate and explore the provision of seven day access to services within health and social care services. To this end, the Council has successfully bid from the STP funding stream associated with seven day working and transformation of services for a temporary additional resource to enable the Department to evaluate the current position, issues and implications regarding seven day access to social care services and develop the business case for the future. Approval is therefore sought to establish a temporary FTE Project Officer (Band B) post for six months at a cost of £20,665, including on-costs.

Other Options Considered

18. There are no other options proposed as the report is an update on the ASC workforce plan.
19. The option of not recruiting to the temporary Project Officer post would mean that Adult Social Care is not able to fully understand the business case and potential impacts regarding access to seven day services in order to develop this jointly as health services make changes.

Reason/s for Recommendation/s

20. The main body of report is for noting only. Recruitment to the temporary Project Officer post will enable the Council to be better informed and make appropriate decisions when engaging in this aspect of the STP workforce plan.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working 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

22. The full financial costs of developing the Team Managers' training programme were assessed and different options evaluated. The programme is now being funded in part through the department training budget and in part by the budget held centrally in Workforce Planning and Organisational Development.

23. Costs of £20,665 (set out in **paragraph 17**) for a temporary (six months) Project Officer (Band B) post will be met from an external bid through the STP programme.

Human Resources Implications

24. These are contained within the body of the report. The Department's recognised trade unions have been supportive of the Team Managers' development programme as a way of supporting managers to engage and embed the ASC strategy.

RECOMMENDATIONS

That Committee:

- 1) notes the update on progress made by the Workforce Delivery Group with the development and delivery of the Departmental Workforce Plan and the provision of information on the next steps to deliver the Plan's objectives
- 2) approves the establishment of an externally funded temporary (six months) full-time equivalent Project Officer (Band B) post.

Sue Batty
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Constitutional Comments (LM 05/01/17)

25. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 05/01/17)

26. The financial implications are contained within paragraphs 22 and 23 of the report.

Background Papers and Published Documents

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.

Workforce Strategy 2016-2018 – report to Personnel Committee on 25 May 2016

Electoral Division(s) and Member(s) Affected

All.

ASCH450

Adult Social Care Workforce Plan

2016-2018

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1. Introduction

The way social care is provided and arranged is changing. These changes affect both the adults in receipt of social care support and the staff employed to provide or arrange it. The aim of this plan is to provide a framework for developing the workforce so that it is effective, appropriately skilled, and resilient enough to respond to the significant challenges it currently faces.

The extent of the challenge is identified in the Council's document 'Redefining Your Council' published in June 2014. This document sets out the Council's intention to '*do things differently, while fostering a culture of creativity and innovation*'.¹

It is also clearly identified within the Council Corporate Workforce Strategy that the overall outcome of the implementation of the supporting delivery plans will be a workforce which is agile, flexible and outward-looking and able to work across organisations to ensure local people receive good quality, value for money services.

Moreover, as part of the Five Year Forward Review, NHS England has confirmed that every health and care system needs to come together to create its own blueprint for accelerating the implementation of the Five Year Forward Review. Systems Sustainability and Transformation Plans are currently being developed.

The Council published an [Adult Social Care Strategy](#) in March 2014, which describes how social care support for adults would be provided in Nottinghamshire in future. The strategy reinforces the expectation that staff should work in ways that;

- Promote the well-being and independence of people who request support **and**
- Prevents, delays and reduces the need for institutional care and long-term care in the community.

The skills, knowledge and abilities of the ASCH workforce need to align with the Council's continuous drive to being a modern, smart and flexible organisation. The corporate vision for Smarter Working is to have 'a workforce able to work flexibly, where and when it best suits their customers and service users and managed by results'.

Nationally in 2011, Skills for Care published a [workforce development strategy](#)². This strategy recognises that a confident, capable and well-trained workforce is required to respond to the national vision of capable communities and active citizens.

This was followed in March 2015 by a report on [The state of the adult social care sector and workforce in England](#).³ This report looks at the workforce across all sectors, including not for profit, private, public and people employed as personal assistants. The national profile reflects the workforce profile in Nottinghamshire; it is predominantly white, predominantly female and aging. Nationally, 1 in 5 workers in social care are over the age of 55. Turnover of staff is also identified as an important issue nationally, with around

¹ Redefining Your Council, Nottinghamshire County Council, June 2014, page 3

² Capable, Confident, Skilled: a workforce development strategy for people working, supporting and caring in adult social care, May 2011

³ The state of the adult social care sector and workforce in England, Skills for Care, March 2015, page 36

300,000 (25.4%) of the workforce leaving their posts each year. Turnover is higher amongst workers in the private sector and those who work for domiciliary care providers.

The Skills for Care reports cover the whole social care workforce. In May 2014, the LGA published [The Standards for employers of Social Workers in England](#). These standards relate specifically to all registered social workers employed within an organisation, as well as managers and social work students; Standard 2 calls for effective workforce planning to, *'make sure that the right number of social workers, with the right level of skills and experience, are available to meet current and future service demands'*.⁴

- This plan will contribute towards the continuous improvement and culture change; adopt a coaching style to develop the skills and competencies needed for the future. Throughout the life of this plan, the department needs to be able to respond to the changing environment and will need to maintain flexibility within its workforce both numerically and functionally. This will be achieved through the department regularly reviewing and refining workforce plans and considering innovative new ways to deliver the service.

2. Purpose

The purpose of the Council's adult social care workforce;

'Our purpose for Adult social care at all levels is, to work with people to promote their independence and well-being, and ensure that they are kept safe.

We will do this by helping people to maximise their opportunities for independence so they can live good lives, or the best they can, in a variety of circumstances. We will also work alongside local communities and providers of health and social care to build stronger and more resilient communities. This helps to keep people safe and in their own communities and can prevent people needing formal social care services'.

In order to achieve this we will ensure that:

- Staff have manageable workloads so they have time to work differently and creatively
- Staff have a formal departmental induction to supplement the corporate online induction programme so that they understand the expectations and culture of the Authority
- Staff feel valued and supported in the work they do, so that we retain experienced staff and attract a new generation of social care workers
- Staff are appropriately trained and have opportunities for career development, including a clear career pathway and core training
- Staff have clarity about their work roles and what is expected of them
- Staff can use their experience to influence proposed changes to the way social care is arranged or provided in Nottinghamshire
- Staff are both empowered and supported to work more efficiently
- Staff are supported to make decisions so services users receive the right support at the right time
- Newly qualified social workers are appropriately trained for the work expected of them, by working with local training providers so that we get applications from suitable candidates

⁴ The Standards for employers of Social Workers in England, LGA, May 2014, page 6

3. Our Workforce

There are over 1909 individual staff (1548 FTE) in the Adult Social Care, Health and Public Protection (ASCH&PP) department who are geographically dispersed over the County.

a. What the workforce data tells us:

The summary of the establishment as at 30 June 2016 is as follows:

ASCH&PP Staffing Numbers by Role		
Job Role	FTE	Headcount
Access and Safeguarding	38	43
ACM & Reablement	671	815
Direct Services	603	771
Emergency Planning and Registration	51	74
Public Health	40	47
Public Protection	12	13
SLT	9	9
Strategic Commissioning	94	105
Trading Standards	20	21
Transformation	11	11
Grand Total	1548	1909

Age:

In line with the rest of the authority the department has an aging workforce as illustrated in the table below.

Age band of staff	
16-25	1.7%
26-35	11.6%
36-45	21.8%
46-55	40.5%
56-65	23.2%
65+	1.2%

Almost two thirds of the employees of the department are aged 46 or over and nearly a quarter are aged over 56.

The average age of NCC employee is 47.4 years. This is above the national average age of 43 years old.

Changes to pensions introduced from April 2015 gave freedom over how staff 55 or over can use their pension pot; staff can choose to retire and draw their pension at any time from age 55 and receive their benefits immediately, although they may be reduced if paid before the Normal Pension Age. There is no cost to the employer if staff choose this option.

This means that potentially staff may decide that they want to retire earlier and whilst their benefits will be reduced they may decide that the income would be sufficient to retire, work part-time or work as an agency worker. This could have an impact on skills, knowledge and experience. There is the need to capture the interests of young people and greater focus on succession planning.

Gender:

Workforce by Gender	
Female	79.93%
Male	20.07%

Overall, the department remains one where females make up of over 80% of the workforce.

This is comparable to the national adult social care workforce in which 82% is female.

Ethnicity:

Workforce by Ethnicity	
Non- BaME	91.84%
BaME	8.16%

The ethnic profile of the department is less diverse than the national profile which is made up of 20% BaME workers. The proportion of BaME adult social care workers for the East Midlands is 15%.

Staff turnover:

Over the last twelve months the turnover rate for leavers from the department is 11.8%

The age profile of these leavers is;

Age band of leavers	
16-25	3.1%
26-35	8.1%
36-45	15.7%
46-55	29.1%
56-65	34.5%
65+	9.4%

Not unsurprisingly the majority of leavers are in the higher age bands, but the percentage of leavers in the 16-25 band is disproportionally higher than the small number of employees in this age range who are currently employed in ASCH&PP (3.1% of leavers compared to 1.7% of employees). A similar scenario exists for employees and leavers aged over 65.

According to National Minimum Data Set for Social Care (NMDS-SC) records, staff turnover is one of the biggest costs to care organisations because the cost of recruiting, inducting and training new staff is considerable. Turnover is also a major influencing factor when it comes to the experience of service users.

Leavers' reasons as recorded on SAP/BMS over the last 12 months are as follows:

Reasons	Number of staff
Dismissal	11
Death in Service	1
End Fixed Term Contract	15
Voluntary Redundancy	34
Resignation	75
Retirement	50
TUPE Transfer	1

Length of service:

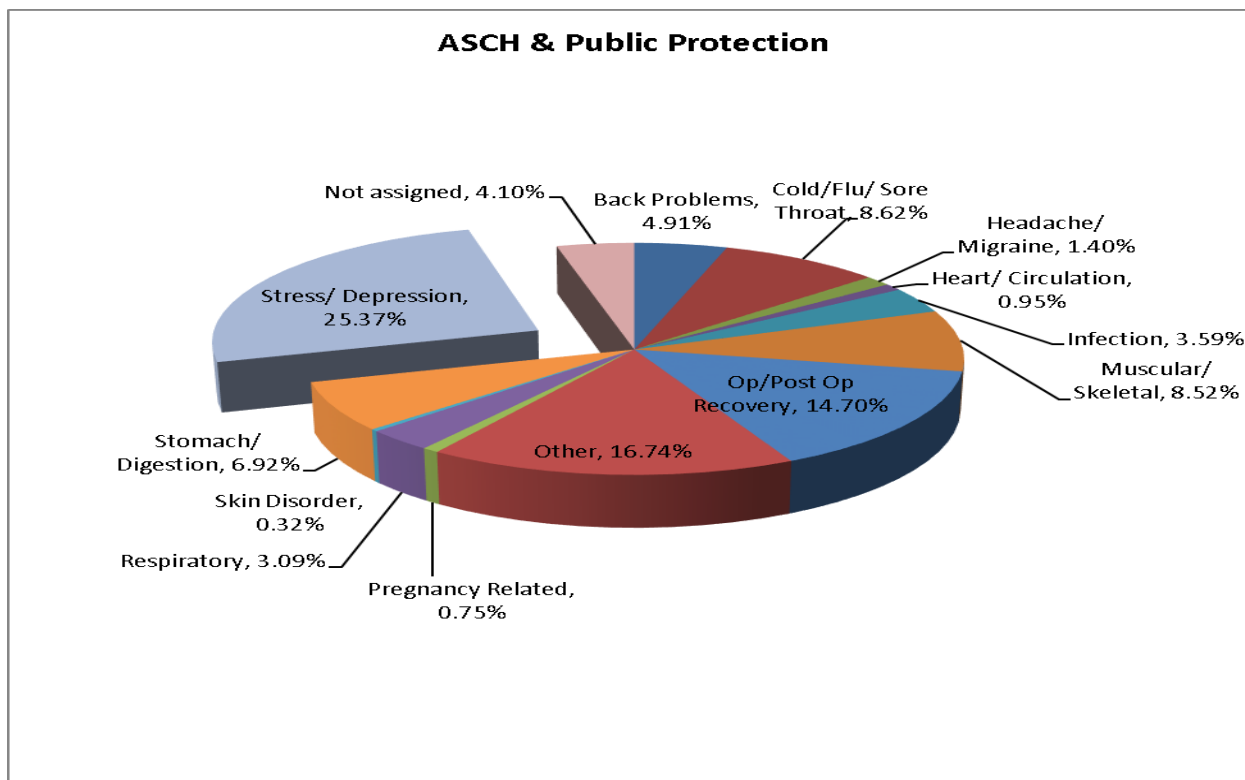
For current employees; well over half have been employed by NCC for 10 years or more.

Those employees with 1 to 2 years' service comprise the smallest group.

Years NCC Service	
0-1	6.7%
1-2	3.1%
2-5	12.2%
5-10	19.8%
10+	58.2%

The average length of service of current staff and for employees who have left over the last 12 months are comparable at 12.6 years and 12.1 years respectively.

Staff Health and Wellbeing:



The chart above shows that Stress remains the most prevalent cause of sickness absence in the ASCH&PP.

High quality services are better provided by staff who themselves are healthy, well and are able to cope with the ongoing changes.

Currently, there is targeted HR intervention to support drive a corporate Health and Wellbeing action plan. They are contacting managers of employees with long-term sickness absence (20 days or more in duration) to establish what management action is being taken and, where appropriate, follow this up with information to support a referral to the Occupational Health service.

Sickness Levels over rolling 12 month trends:

	July 2014 - June 2015	September 2014 - August 2015	January 2015 to December 2015	April 2015 - March 2016
Authority	6.60	6.51	6.60	6.86
NCC Target	7.00	7.00	7.00	7.00
ASCH&PP	10.94	10.65	10.96	10.97

Absence levels remain highest in ASCH&PP at 10.97 days per employee.

The performance target for 2015/16 for the organisation is 7.00 days per employee per annum.

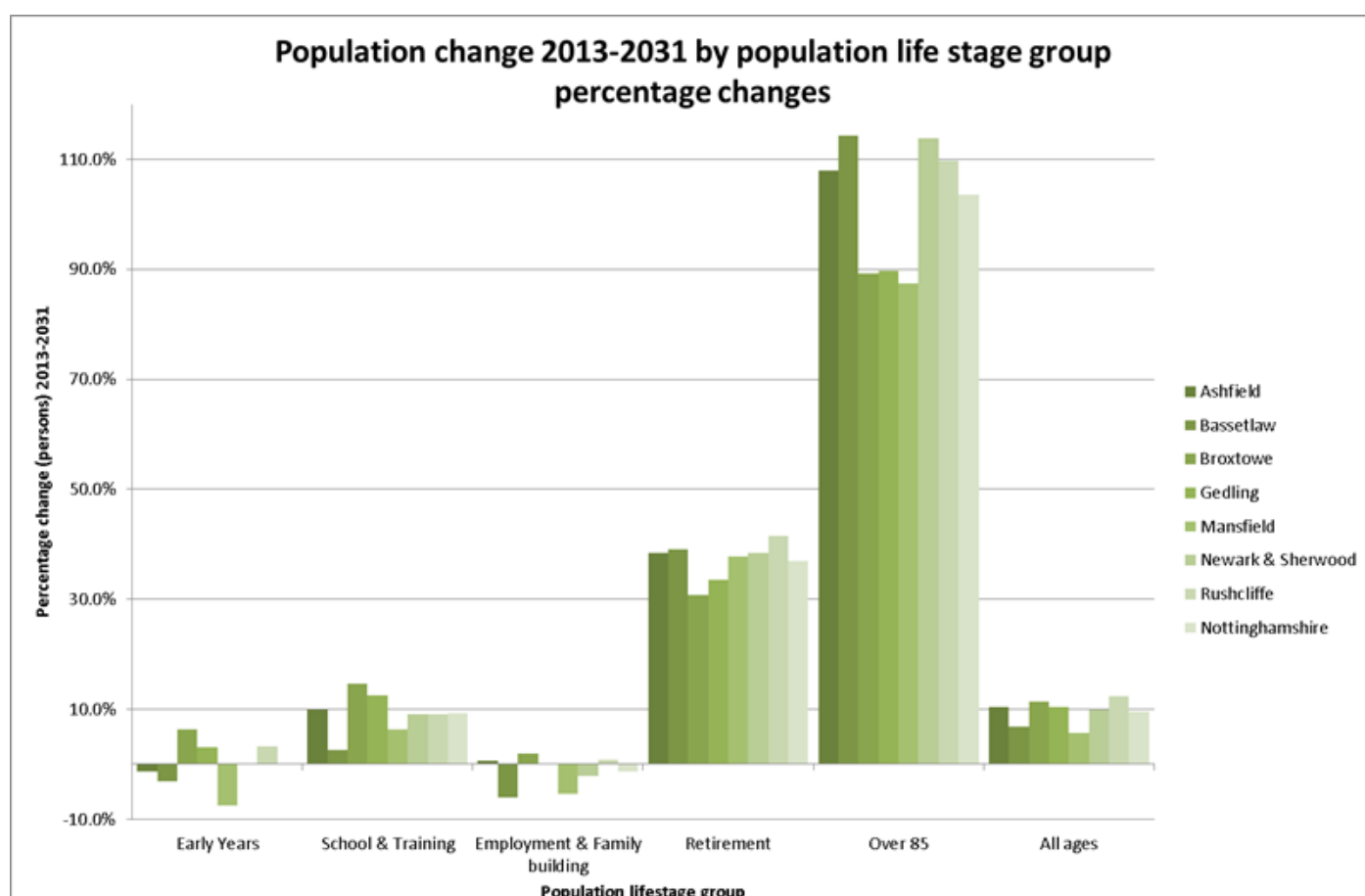
The average sickness absence levels as at 31st March 2016 for the organisation stood at 6.86 days.

b. What the demographic data and information tells us:

The total population of Nottinghamshire County is expected to increase by 76,200 people over the 15 years to 2031. The District showing the largest increase in population is Rushcliffe (projected to grow by some 13,900 people 2013-2031, followed by Broxtowe and Ashfield (12,700 and 12,600 people respectively). The population life stage group showing the largest increases in population is the retirement group (65-84 years), occurring in the rural districts of Bassetlaw, Newark & Sherwood and Rushcliffe, and also the urban district of Ashfield. The population over 85 is expected to increase by 20,000 people in the county during 2013-2031, again the largest increases occurring in Bassetlaw, Newark & Sherwood and Rushcliffe.

The population life stage group showing decreases in population over the years to 2031 is the employment group (20-64 years), as the population in the baby boom years ages and the effects of the decline in the birth rate in the 1980's and 1990's feeds through into this age group. Bassetlaw, Mansfield and Newark & Sherwood Districts show decreases in population within this life stage category over the years to 2031. The education life stage group (5-19 years) also shows an increase in population.

The graph below details the percentage changes in population from 2013 to 2031 broken down by population life stage group. The population aged 85 and over is expected to double in the county over the years to 2031.



c. What does this mean for Adult Social Care?

- Potentially large increase in demand for care services
- Increase in the number of adult social care jobs required
- Potential increase in the number of self-funders presenting for assessments in response to phase 2 of the Care Act which is due to be implemented in April 2020
- Limited capacity in the provider market
- Additional skills and knowledge requirements for workers in older adults services
- Increased need for brokerage and coordination roles
- Increased uptake of direct payments and demand for personal assistants

Analysis conducted by Skills for Care shows a high correlation between the number of people aged 65 and over and the size of the adult social care workforce (i.e. the more people aged 65 and over, the larger the adult social care workforce). Skills for Care estimates that on average in 2015, for every six people aged 65 or over in the population, one adult social care job is required.

It should be noted that this does not account for any political, economic, technological or social factors that could have an impact on the future size of the workforce. It is important to consider local policies and influences on practice that are also the drivers of demand for care.

In addition to the demographic changes, the local factors that may be significant in influencing demand may include: the relative wealth or deprivation in the population; resolution rates at the front end; the take-up of assistive technology; the availability of Supported Living and Extra Care Housing and the approach to prevention and promoting independence.

The predicted population changes demonstrate an imbalance between workforce supply and likely increase in demand for care services. However, this also presents opportunities to develop the adult social care workforce and grow the local labour market.

The predictions in relation to future pressures in social care emphasise the need for continued investment in preventative activity, technological solutions and developing a broader range of support for people. Particular focus should also be given to making the sector more attractive to younger people and BAME workers to develop and retain a more diverse workforce profile.

4. National Drivers and Pressures

a. Financial

Nationally the demand for Adult Social Care Services is increasing. The Local Government Association Adult Social Care Efficiency Programme summarises these national pressures in its final report (July 2014):

‘Since 2010 spending on adult social care has fallen by 12 per cent in real terms as councils have delivered savings of £3.53 billion to adult social care budgets. This has occurred at a time when the number of people looking for support has increased by 14 per cent. Coupled with these unprecedented financial pressures and increases in demand, councils are facing demographic change, significant new legislation on social care and fundamental changes to the local government finance system’.

The ADASS annual Budget Survey 2015 Report concludes that the financial impact of these pressures are:

‘Cost pressures relating to the increased numbers of older and disabled people needing care and support continue to run at 3% per year. This equates to £350m additional costs in 2015/16, of which 76% was funded by councils (£270m) ’.

In addition to the growing demand as a result of demographic pressures, Councils have faced significant legislative change that has brought new duties and extended new responsibilities, including the Care Act and the Supreme Court judgment on Deprivation of Liberty.

b. Legislation

The social care reforms of the Care Act from 1 April 2015 have widened the responsibilities of the local authority increasing the demand for Adult Social Care Services. On the 17 July 2015 the Government announced the postponement of Part 2 of the Care Act until 2020. Although, this reduces some of the anticipated demand for self-funder assessments, demand related to Part 1 of the Care Act implemented in April 2015 is the greater workforce issue.

In summary, Part 1 of the Care Act introduced a range of new and extended responsibilities:

- to provide information and advice to citizens of Nottinghamshire to help them to access the support they need
- increase responsibility to support carers
- extended the responsibility of Councils to provide a range of preventative services to people at risk of developing social care needs and for those with social care needs to prevent those needs becoming long-term
- to assess all those with an appearance of care and support needs including self-funders, and extended this right to assessment and services to eligible carers
- to assess prisoners and people living in approved premises
- to provide access to independent advocacy for those people who need support to participate fully in their assessment
- extended the criteria for safeguarding
- provide a deferred payment scheme
- proactively managed provider failure and manage the market

More recently, NHS England has confirmed that every health and care system needs to come together to create its own local blueprint for accelerating implementation of the Five Year Forward View. To this end, Sustainability and Transformation Plans (STP) are being developed across Britain.

Similarly, The Children's and Social Work Bill has been introduced recently to ensure that our most vulnerable children, young people and adults get the benefit of excellent services by promoting social work as a profession of choice for high calibre graduates and also improving public confidence in social work services

The most significant implication of the Children's and Social work Bill for Adult Social Care and social workers is that there will be a new regulator for all social workers.

c. Integrated Workforce

In addition to these responsibilities, the Care Act requires Local Authorities to integrate with Health and work in partnership with a range of organisations. The evidence is that increased pressure on the health service increases the level of need for Adult Social Care.

What is workforce integration?

Integration is an enabler for transformational change. It is not an end in itself and will operate at different levels:

- Strategic place-based integration
- Organisational and
- Individual level e.g. Personal health Budgets and Personal Budgets

There are also many different forms that workforce integration can take including;

- aligned staff/teams/services
- co-located staff/teams/services
- staff working to aligned, shared pathways
- holistic worker roles, where staff take on tasks that cut across individual agency responsibilities
- joint appointments to strategic commissioning and managerial posts, as well as more formal integration, such as: single line management structures
- new organisations; and
- pooled workforce budgets

Formal, organisational restructuring can be an enabler, but it is also known to be resource-intensive and too often becomes the focus of any change, rather than this being on developing and embedding new ways of working and cultural change. So, form should follow function and major structural re-organisation only be embarked on if it is clear that there are benefits that cannot be achieved without doing this. A good starting point therefore, should be to clarify what any new integrated workforce model aims to achieve.

What will indicate a successful integrated workforce model from a social care perspective? It will;

- enable people to achieve better individual health and well-being outcomes
- enable individuals to experience input from different professionals, services and agencies as an integrated, holistic service
- promote good quality of care
- demonstrate value for money and make best use of public money across the system
- be evidence based, or, if innovating, evaluate the purpose and impact of the model with regard to social care, as well as health objectives
- blend health, social care and other professional roles such as housing in balance, maintaining the core professional knowledge and skills that social care offers, whilst enabling some tasks to be completed across roles
- have a clear joint workforce delivery plan that includes supporting and facilitating the local provider market workforce
- be supported by clear governance arrangements for monitoring delivery of the workforce model and plan, managing performance, risks and rewards
- be supported by a joint workforce learning and development plan that promotes the delivery of core social care strategic objectives, as well as health and other agencies. This will include;
 - an improved integrated information and advice offer as a first option for people
 - embedding a focus on prevention at all stages of working with people through for example, reablement, promoting independence, technology enabled care and self-care
 - a shared understanding, framework and tools to pro-actively manage risks to maintaining independence
 - targeted, proactive multi-agency work that includes factors to predict people at risk of requiring social care packages and residential care, as well using health data to prevent hospital admissions
 - promoting the increased resilience of people who use services, their carers and communities
 - enabling staff to access a shared information system/ IT platform on how to do good support planning with people, in order to achieve the best outcomes possible from their integrated Personal Health and Social Care budgets

d. Vision

Our operational focus is to create a resilient and innovative workforce to meet the future challenges. Our hope for our region is to have consistently high performing organisations that are well-run and well-led. We want the people of our region to see and experience an open and transparent culture in all our partner organisations, illustrating consistent trust that the workforce is focused on delivering services to the highest and utmost level. Stakeholders will be asked to agree on the strategy and demonstrate how they intend to commit to this within their own organisations. After consideration and discussion, the East Midlands Regional Workforce Development Group has identified the following values and principles to encompass the Regional Workforce Strategy and Vision and form the basis of the framework for our Charter, to which all our partners can sign up.

e. Transformation

Councils have been faced with delivering savings programmes to meet the unprecedented challenges of reduced funding, demographic and inflationary pressures. To support councils to deliver efficiency in social care, the LGA has worked with the sector to share ideas, innovation and evidence of what works in making the required savings. Some key

themes emerge in what key activities and approaches need to be in place to deliver a successful efficiencies programme. These include the following:

- developing a new contract with individuals and communities
- reducing demand in formal social care support
- radical transformation of service delivery
- improving commissioning, procurement and contract management
- integration with other public or independent providers

5. Local Drivers

a. The Adult Social Care (ASC) Strategy

Nottinghamshire County Council has had to deliver high level of savings to meet the challenges of reduced funding. Between 2011/2012 and 2014/2015 the Adult Social Care and Health Department made savings of £58,580,000. There is a target of £28,300,000 for the years 2015/16-2019/20 and a further target of £11,691,000 for the years 2016/17 – 2018/19. This totals £98,571,000 over an eight-year period.

In response to the scale of the challenge and to make the required high level of sustainable savings over a number of years, a strategic approach has been developed in Nottinghamshire. The Adult Social Care Strategy published in 2014 sets out a new model of social care that encourages individuals to take more responsibility for their care and support with families and communities being supported to assist. This has required setting new expectations with social care employees, individuals, communities and partners. The Adult Social Care Strategy seeks to manage demand for social care by diverting people away from formal support, promoting independence and resilience and offering preventative interventions prior to assessment, while offering choice and control and ensuring value for money.

b. What our staff are telling us

In addition to employee surveys, a number of workforce engagement events have taken place throughout the year:

A large number of the issues identified at the various engagement events echo the results of the Health Check Survey and in the main support the findings and the associated action plan.

The general feedback falls largely into four categories:

Systems and Procedures

Staff feel that a number of existing processes do not support the effective use of resources, are too lengthy or complicated and they are not always sure of their purpose or value.

Communication and a shared vision

Due to the significant amount of change happening across the department there was a general sense that staff were not entirely sure of the shared vision for the department and how this could be applied in practice, and staff are not always confident that they have the latest information available. This has led to a perception of conflicting and contradictory messages being received and as a result, contradictory practice.

Support

Many staff want to embrace change and are clearly working within the Adult Social Care Strategy but feel they do not have the support or tools to make the shift needed.

Training

Staff identified a large number of areas where they felt they needed more training to do their job effectively. This is been actioned by the Training Reference Group.

An action plan setting out the key priorities has been developed, taking into account feedback gathered from current ASCH employee survey results, employee engagement events and ongoing workforce discussions. Implementation of the plan is being managed through the Workforce Delivery Group.

c. Smarter Working

Continuing work to reduce the scale of our office accommodation across the Council, due to improved space utilisation, working smarter and changing service delivery has helped to reduce the organisations property estate by 11 buildings, saving a significant amount of money which can be reinvested to protect frontline services for the most vulnerable citizens in Nottinghamshire.

The way the Council delivers services will continue changing to ensure value for money. Smarter Working is fundamental to ensure working practices are as efficient and effective as possible whilst continuing to improve our service offer to residents.

6. Principles

The workforce development plan will be delivered according to the following principles:

- We will support and enable the workforce to deliver the Adult Social Care Strategy
- We will embed a culture of 'one' Nottinghamshire workforce, which incorporates all professionals working to secure wellbeing and improved outcomes for vulnerable adults and their carers
- We will deliver workforce development activity to the integrated workforce wherever possible, so as to maximise opportunities for relationship building and develop consistency in our approach to working with vulnerable adults and their carers
- We will value and make the most of the skills, experience and expertise already within the workforce

- We will use our resources efficiently and effectively
- The plan will be developed in collaboration with the operational staff to ensure it is fit for purpose on the frontline and will look internally to find local solutions to local problems
- We will challenge practice and the status quo at all levels to ensure the workforce plan is relevant in the current climate and can be responsive to future changes
- We will ensure our workforce adopt smart and flexible working practices to improve our service offer to vulnerable adults and their carers

7. Looking ahead - Workforce Development Challenges

- Baseline current workforce

To develop a clearer view of Adult Social Care current workforce including; qualified and wider workforce.

This work along with the results of the recent Health Check and better understanding of the labour market will allow us to establish current and future gaps and achieve a framework of having the right people doing the right job in the right place at the right time and with the right knowledge, skills, attitudes and behaviours and clear career pathways to achieving and progressing future delivery service

- To identify and plan an innovative core training and development activities to enable the service to embed the Adult Social Care Strategy
- Developing leadership and management capacity
Develop a leadership and management approach that engages all staff, including coaching and mentoring. Equip Team managers with skills and knowledge
- Recruitment
Ability to safely recruit sufficient staff with the right qualifications, knowledge and experience to sustain and improve service
- Capture the interests among young people before they chose another career path, and promote other graduate career path schemes and use to build a diverse workforce and succession planning.
- Retention
Ability to retain sufficient staff with the right qualifications, knowledge, skills, and experience to sustain and improve services. This includes encouraging smart and flexible working practices to improve work-life balance
- Professional development and developing a learning and coaching culture.
Personal growth constitutes a very strong driver in today's workforce. Employees want to develop new knowledge and skills in order to improve their value and enhance their own self-esteem. Moving forward, to use EDPR to ensure employees are trained and

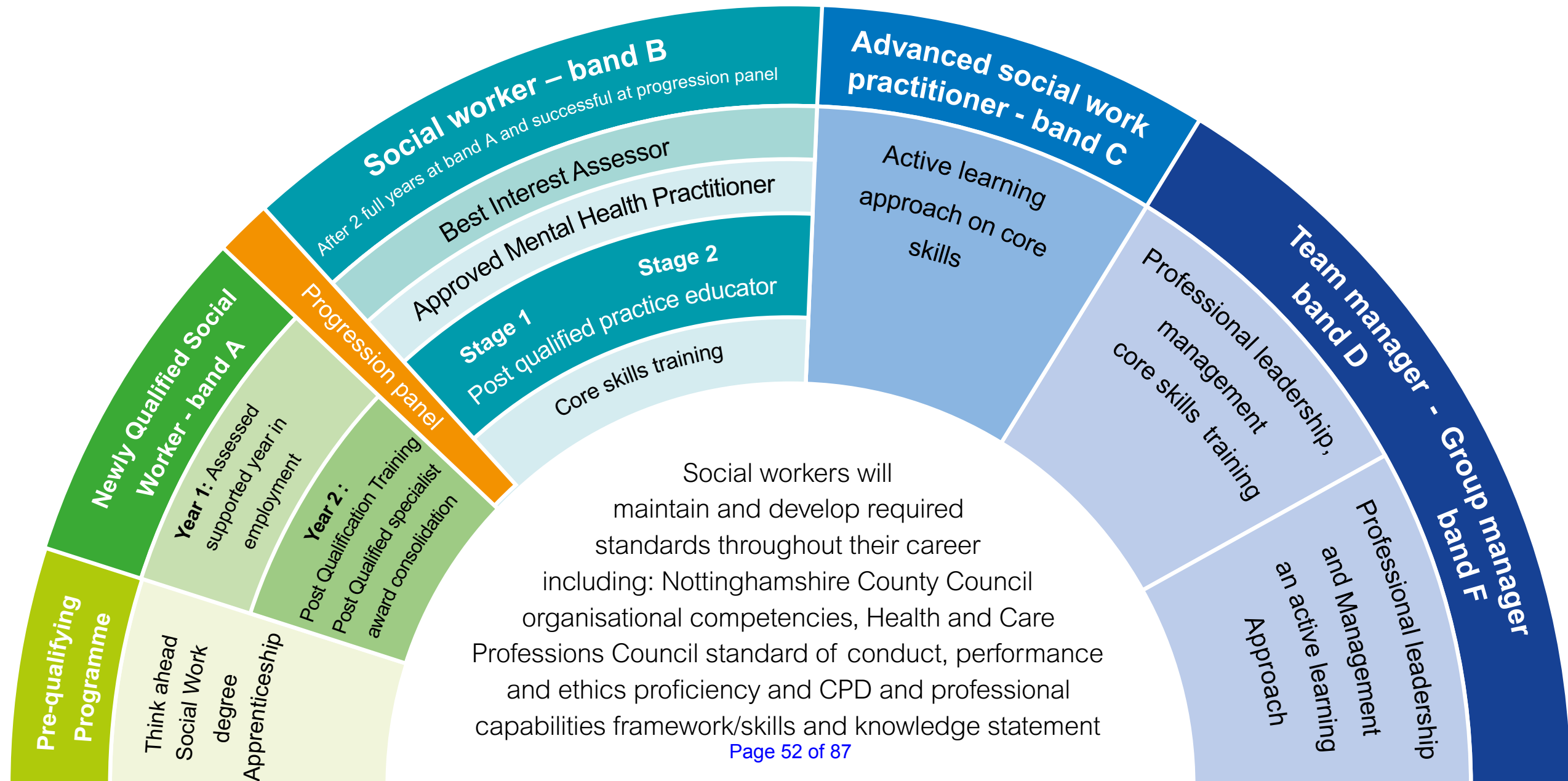
developed more effectively in their present roles and are prepared systematically for future roles by assisting them to achieve the qualifications, skills and knowledge for roles

- The Social Work Task force has made a number of recommendations in relation to the professional development of social workers. Implementation of these initiatives will support this strategy
- Effective Workload management
To review tasks undertaken by professional staff that could be done more cost-effectively elsewhere
- Health and Wellbeing strategy to shift focus from sickness absence management to health and wellbeing
- Agile Working - workflow redesign which incorporates dimensions of time and place flexibility. Support staff to work differently focusing on performance and outcomes
- Integrated working - ensure that the workforce strategies within social care, health and other stakeholder organisations work together to make best use of resources and to promote the interests of service users and their carers.



Career pathway: Social Workers in Adult Social care

The career pathway is intended to give front line social workers a clear direction and supported development to progress their careers at Nottinghamshire County Council. We also offer access to a comprehensive programme of in-house continuous professional development (CPD) short courses to ensure that social workers have the necessary access to learning, knowledge and skills at all stages of their careers.



6 February 2017

Agenda Item: 7

**REPORT OF THE PROGRAMME DIRECTOR OF TRANSFORMATION,
ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION****SAVINGS AND EFFICIENCIES UPDATE****Purpose of the Report**

1. To update the Committee on progress with budget savings projects being delivered by the Adult Social Care, Health and Public Protection (ASCH&PP) department over the period 2016/17 to 2019/20.
2. To inform the Committee of changes / clarifications relating to three savings projects, approved at previous Committees during 2016/17, which will deliver savings from April 2017.
3. To update the Committee on the progress of the Adults Portfolio of Redefining Your Council.

Information and Advice**ASCH&PP Department's Savings and Efficiency Programme 2016/17 to 2019/20**

4. The ASCH&PP department has already delivered efficiency savings of £67m over the period 2011/12 to 2015/16 through the delivery of savings and efficiency projects relating to Adult Social Care (excluding Public Protection savings).
5. This report updates Committee on progress, as at Period 8 2016/17, with the 35 remaining projects falling under the remit of the Adult Social Care and Health (ASCH) Committee, approved by Full Council on 27 February 2014, 26 February 2015 and 25 February 2016. Please refer to **Appendices 1 and 2**. In total, the savings profile associated with these projects is as follows:

2016/17	2017/18	2018/19	2019/20	Total
£12.224m	£5.591m	£7.034m	£0.294m	£25.143m

6. Please note that this report excludes progress on the savings projects falling under the remit of the Community Safety Committee, Public Health Committee, and the Business Support Services Review (ASCH&PP and Children, Families & Cultural Services) project, which falls under the remit of the Personnel Committee.

7. The overall departmental position in terms of agreed budget savings, including savings at risk, is contained within the body of the financial monitoring report that is regularly considered by Finance and Property Committee, and its associated appendix. Any change requests approved to amend projects' savings targets and / or their profile of savings are also reported to Finance and Property Committee (see background papers).
8. As Members are aware, each project is RAG (Red; Amber; Green) rated as defined in the status key within **Appendix 1**. Based on good practice from elsewhere, the County Council uses an 'experiencing obstacles' (yellow) category. This gives project managers a chance to highlight that aspects of a project are 'off target' without this necessarily meaning that there will be a resultant risk to overall savings delivery (e.g. some slippage in tasks within the plan etc.). In effect, the 'experiencing obstacles' category provides an early warning that action needs to be taken to rectify a problem and / or stop a position worsening so the project becomes 'at risk.' However, at this stage the scale of the issue, and any potential savings at risk, may be unknown and further work is required to ascertain this.
9. One example is the *Further Expansion of Assistive Technology (AT) to Promote Independence* project. As shown in **Appendix 1**, as at November 2016 the project was reporting an *Experiencing Obstacles* status as although the Project Manager is projecting that the savings target of £0.646m would be achieved by the end of March 2017, this is reliant on validation of the first eight months of the project's delivery by Finance, which is expected early in the New Year and anticipated to confirm that the savings are all on target. AT activity is 35% up on the same period last year, and supporting approximately 800 new service users per annum.
10. The current RAG rating of the 35 remaining projects as at Period 8 2016/17, and the breakdown of the remaining savings targets assigned to them, are provided in **Appendix 1**. This also shows any projects reporting exceptions and savings at risk of either slippage into future financial years and / or at risk of non-delivery. Further work has been done, where possible, to quantify any savings at risk of slippage of non-delivery since Period 8 information was presented in **Appendix 1**, and the following (supported by detail in **Appendix 2**) provides a summary of the current position with regard to the achievement of the £12.224m 2016/17 savings target:
 - a) £3.862m savings (32%) will be realised by year end, from projects already completed / closed. Of this, £0.145m has been achieved in an alternative way.
 - b) £7.271m savings (59.5%) are on target to be achieved by year end.
 - c) £0.750m savings (6%) are currently quantified as being anticipated to slip into future years.
 - d) £0.281m savings (2%) are currently quantified as at risk of non-delivery for 2016/17.
 - e) £0.060m savings (0.5%) are not yet quantified as to the elements that are on target or likely to slip into 2017/18. Once quantified, the breakdown will be reported.

In addition:

- a) Of the £0.466m savings that were not achieved during 2015/16 and carried forward to 2016/17, £0.079m will be made up by March 2017 through over-achievement against the *Reduction in Long-Term Care Placements* project. However, the remaining £0.387m is at risk of non-delivery by March 2017.

b) There is an over-achievement of £0.450m savings projected against the *Targeted Reviews* and a one-off over-achievement of £0.600m savings against the *Direct Payment* project. The *Targeted Review* project is reviewing the profiling of future years' savings, in view of performance to date.

11. Within a portfolio(s) of programmes and projects of the scale of that being undertaken by the Department, it is to be expected that some projects will have delivery issues, which ultimately may result in failure to meet some or all of the savings. This is particularly the case where change has been overlaid on change and where projects are more transformational. For those projects reporting exceptions in **Appendix 1**, further detail on the reasons for these, and mitigating action in place to manage these, is provided in **Appendix 2**.

Changes / Clarifications Relating to New Savings Projects

12. The Committee is also asked to note the following changes / clarifications relating to three new savings projects that will deliver additional savings to the ASCH&PP department from April 2017, which have been approved at previous Committee meetings during 2016/17:

Project	Committee Approval	Change / Clarification
KeyRing Services	October 2016 ASCH Committee	To be renamed Community Living Network.
Maximise the income available to the Council's directly provided adult social care services	October 2016 ASCH Committee	<p>No savings figure specified in the original committee report. Profiled savings of £0.060m in 2017/18 and £0.070m in 2018/19 (total of £0.130m) have been assigned to the project.</p> <p>ASCH Committee previously approved the establishment of a Business Development Manager post to take forward the savings proposal. However, subsequent to this, the November 2016 Policy Committee approved a recommendation to continue the commercial development support to services for the next two years, which in effect meant that service areas should not employ their own commercial resources but should instead utilise the support of the Commercial Development Unit. Although this will not provide the service with any additional capacity, Direct Services will endeavour to meet the savings target within existing resources. A separate report on this is also on the agenda of today's Committee meeting.</p>
START scheduling service user visits	May 2016 Policy Committee (as part of a wider report on the Smarter Working	No savings figure specified in the original committee report. Profiled savings of £0.006m in 2017/18 and £0.033m in 2018/19 (total of £0.039m) have been assigned to the project.

	Programme)	
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Adults Transformation Portfolio Update

13. A quarterly update on key achievements for the five programmes that comprise the Adults Portfolio of Redefining Your Council is contained in **Appendix 3**. The Portfolio is reporting good progress in achieving key outcomes and benefits required from the programme. The update also provides a forward view for the next three months. Policy Committee also receives quarterly reports on progress against the Council's Strategic Plan and Redefining Your Council. This report was last presented at the meeting on 14th December 2016.

Other Options Considered

14. There are no other options to outline in relation to this report as it updates Committee on existing budget saving projects currently being delivered by the ASCH&PP Department, informs Committee of changes / clarifications relating to additional projects approved at previous Committee meetings during 2016/17, and reports progress of the Adults Portfolio of Redefining Your Council.

Reason/s for Recommendation/s

15. To continue to support delivery of the Adults Transformation Portfolio, including the savings and efficiency programme.

Statutory and Policy Implications

16. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working 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

17. Progress in achieving the 2016/17 to 2019/20 savings targets for each existing project is detailed in **Appendices 1 and 2**.

Public Sector Equality Duty implications

18. The equality implications of the projects have been considered during the development of the projects and, where required, Equality Impact Assessments undertaken.

Implications for Service Users

19. As above, the implications of the projects on service users have been considered during the development of the projects.

RECOMMENDATION/S

That the Committee:

- 1) notes the progress with budget saving projects being delivered by the Adult Social Care, Health and Public Protection department over the period 2016/17 to 2019/20, as detailed in **Appendices 1 and 2**.
- 2) notes the changes / clarifications relating to three savings projects, approved at previous Committees, which will deliver savings from April 2017, as outlined in **paragraph 12**.
- 3) notes the key achievements of the Adults Portfolio of Redefining Your Council, as outlined in **Appendix 3**.

Jane North
Programme Director of Transformation
Adult Social Care, Health and Public Protection

For any enquiries about this report please contact:

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Constitutional Comments

20. As this report is for noting only, no Constitutional Comments are required.

Financial Comments (KAS 20/01/17)

21. The financial implications are contained within paragraph 17 and Appendix 1 of the report.

Background Papers and Published Documents

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

- Report Policy Committee, 13 November 2013: Savings Proposals 2014/15 – 2016/17 and associated published Outline Business Cases and Equality Impact Assessments.
- Report to Full Council, 27 February 2014: *Annual Budget 2014/15* and associated published Outline Business Cases and Equality Impact Assessments.
- Report to Adult Social Care and Health Committee, 12 May 2014: *Overview of Savings Projects to be delivered 2014/15 to 2016/17 by the Adult Social Care and Health Department*.

- Report to Adult Social Care and Health Committee, 3 November 2014: *Overview of Departmental Savings and Efficiencies Programme*.
- Report to Policy Committee, 12 November 2014: *Redefining Your Council: Transformation and Spending Proposals 2015/16 – 2017/18*.
- Report to Finance and Property Committee, 19 January 2015: *Financial Monitoring Report: Period 08 2014/15* and Appendix.
- Report to Full Council, 26 February 2015: *Annual Budget Report 2015/16* and associated published Options for Change and Equality Impact Assessments.
- Report to Adult Social Care and Health Committee, 30 March 2015: *Transformation Resource – Overview of Departmental Requirements*.
- Report to Adult Social Care and Health Committee, 1 June 2015: *Overview of Departmental Savings and Efficiencies Programme – Adult Social Care, Health and Public Protection*.
- Report to Finance and Property Committee, 14 September 2015: *Financial Monitoring Report – Period 4 2015/2016*.
- Report to Adult Social Care and Health Committee, 2 November 2015: *Departmental Savings and Efficiencies Programme – Adult Social Care and Health*.
- Report to Policy Committee, 9 December 2015: *Spending Proposals 2016/17 – 2018/19*.
- Report to Full Council, 25 February 2016: *Annual Budget 2016/17* and associated published Outline Business Cases and Equality Impact Assessments.
- Report to Adult Social Care and Health Committee, 7 March 2016: *Departmental Savings and Efficiencies Programme – Adult Social Care and Health*.
- Report to Policy Committee, 18 May 2016: *Smarter Working Programme*.
- Report to Adult Social Care and Health Committee, 13 June 2016: *Update on the Transformation Portfolio*.
- Report to Finance and Property Committee, 18 July 2016: *Financial Monitoring Report: Period 2 2016/2017*.
- Report to Adult Social Care and Health Committee, 10 October 2016. *Development of KeyRing Services*.
- Report to Adult Social Care and Health Committee, 10 October 2016. *Savings and Efficiencies Update and Proposal to Maximise the Income Available to the Council's Directly Provided Adult Social Care Services*.
- Report to Policy Committee, 19 October 2016: *Supported Housing – Risks to Existing Services and New Developments*.
- Report to Policy Committee, 16 November 2016: *Commercial Development Unit*.

Electoral Division(s) and Member(s) Affected

All.

ASCH452

Appendix 1: Project Statuses as at November 16 Highlight Reports and Period 08 Budget Monitoring Information - ASCH

Appendix 1

Project Name	Project Status (Last Month) October 2016	Project Status (This Month) November 2016	Project Savings					Projected At Risk / Slippage & Over Achievement						Savings delivered in an alternative way	Net at risk amount
			2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s	2015/16 (£000)s	2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s		
High Governance Projects															
Redesign of Assessment and Care Management Functions & Organisational Re-design	Closed or Completed	Closed or Completed	250				250						0		0
Living at Home Phase II	Experiencing Obstacles	Experiencing Obstacles	397	0	0	0	397		25		-114		-89		-89
Reduction in long-term care placements	At Risk	At Risk	423	300	400	0	1,123	197	-79				118		118
Day Services	Closed or Completed	Closed or Completed	490				490						0		0
Residential Short Breaks Services	Closed or Completed	Closed or Completed	250				250						0		0
Reducing the Costs of residential Placements - Younger Adults	At Risk	At Risk	1,000	0	500	0	1,500	269	545	-545			269		269
Care and Support Centres	Experiencing Obstacles	Experiencing Obstacles	492	292	3,268	294	4,346						0		0
Direct Payments	On Target	On Target	1,823	580	1,280	0	3,683		-600				-600		-600
Promoting Independence in supported living and outreach services	On Target	Experiencing Obstacles	951	500	250	0	1,701		180	-180			0		0
Promoting Independent Travel	Experiencing Obstacles	At Risk	191	389	0	0	580		181				181		181
Early Resolution (Consulted on as - C05 New operating model for the Social Care Pathway)	On Target	On Target	0	176	176	0	352						0		0
Targeted Reviews	On Target	On Target	480	1,010	1,010	0	2,500		-450				-450		-450
Further Expansion of Assistive Technology to Promote Independence	Experiencing Obstacles	Experiencing Obstacles	646	543	40	0	1,229						0		0
High Governance			7,393	3,790	6,924	294	18,401	466	-198	-725	-114	0	-571	0	-571

Project Name	Project Status (Last Month) October 2016	Project Status (This Month) November 2016	Project Savings					Projected At Risk / Slippage & Over Achievement						Savings delivered in an alternative way	Net at risk amount
			2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s	2015/16 (£000)s	2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s		
Low / Medium Governance Projects															
Reduction in staff posts in the Joint Commissioning Unit	Closed or Completed	Closed or Completed	149				149						0		0
Savings from the Supporting People budget	Closed or Completed	Closed or Completed	1,950				1,950						0		0
Various contract changes by the Joint Commissioning Unit	Closed or Completed	Closed or Completed	190				190						0		0
Various options to reduce the cost of the intermediate care service	On Target	On Target	800	800			1,600						0		0
Ensuring cost-effective day services	On Target	On Target	150				150						0		0
Gain alternative paid employment for remaining Sherwood Industries staff	On Target	On Target	35	35			70						0		0
Partnership Homes	On Target	On Target		292			292						0		0
Quality Assurance and Mentoring Package	Closed or Completed	Closed or Completed	75				75		75				75	75	0
Short Term Prevention Services	On Target	On Target	200				200						0		0
To create a single integrated safeguarding support service for the council	Closed or Completed	Closed or Completed	70				70		70				70	70	0
Development of a single integrated meals production and delivery service	On Target	On Target	293				293						0		0
Strategic Commissioning - Review of Contracts	Closed or Completed	Closed or Completed	43				43						0		0
Older Adults Residential Care Banding (OfC C02)	Experiencing Obstacles	Experiencing Obstacles	100				100						0		0
Reduction in transport budget	Experiencing Obstacles	Experiencing Obstacles	50	50	50		150						0		0
Change to the staffing structure in the Adult Access Service	On Target	On Target	10				10						0		0
Day Services - withdrawal of Catering and Facilities Management Advisory Service	On Target	On Target	28				28						0		0
Investment in Shared lives	Experiencing Obstacles	Experiencing Obstacles	60	60	60		180						0		0
Quality and Market Management: reduction in staffing	Closed or Completed	Closed or Completed	45				45						0		0
Improving collection of Continuing Healthcare funding	Closed or Completed	Closed or Completed	350	350			700						0		0
Increase in transport charge	On Target	On Target	80	80			160						0		0
Charge for Money Management service	On Target	On Target	134	134			268						0		0

Project Name	Project Status (Last Month) October 2016	Project Status (This Month) November 2016	Project Savings					Projected At Risk / Slippage & Over Achievement						Savings delivered in an alternative way	Net at risk amount
			2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s	2015/16 (£000)s	2016/17 (£000)s	2017/18 (£000)s	2018/19 (£000)s	2019/20 (£000)s	Total (£000)s		
Increase meal charges within day services	On Target	On Target	19				19						0		0
Low / Medium Governance			4,831	1,801	110	0	6,742	0	145	0	0	0	145	145	0
Total			12,224	5,591	7,034	294	25,143	466	-53	-725	-114	0	-426	145	-571

Key for Status

On Target	Successful delivery of the project to time, cost and quality is achievable and there are no major outstanding issues at this stage that threaten delivery.
Experiencing Obstacles	Successful delivery is probable, however, there are minor issues which need resolving to ensure they do not materialise into major issues threatening delivery. This is an early warning category, if the minor issues are resolved in a timely manner, it is unlikely that project savings will be put / remain at risk.
At Risk	Based on available evidence, successful delivery still appears feasible but significant issues exist with scope, timescales, cost, assumptions and/or benefits. Issues appear resolvable, but action is required.
Compromised	Based on available evidence, successful delivery of the project appears to be at significant risk. There are major issues with project scope, timescales, cost, assumptions and/or benefits. Immediate action required to resolve issues.
Closed or Completed	Project benefits have been achieved, or there has been an official change to the benefits profile (through change control) so the project is complete or declared undeliverable.
No Status	Awaiting major points of clarification / decision-making to enable PID and plan to be completed.

Project exceptions for 2016/17 – reasons and mitigating action

Project	Reason for Exception	Mitigating Action
Living at Home (Phase II)	Small under delivery of £0.025m projected on 2016/17 target. There has also been slower than planned progress with the development of some of the new Extra Care schemes, some of which are linked to the closure of the Care and Support Centres.	The £0.025m shortfall will be made up by Full Year Effect in 2018/19, with a total of £0.114m savings projected to be delivered with no savings target currently allocated.
Reduction in long-term care placements	<p>£0.118m of the £0.197m savings that slipped from 2015/16 to 2016/17 will not be made up by year end. This is because there were some delays to the development of new larger schemes already approved, and some delayed moves of individuals from residential care to supported living.</p> <p>At this stage it cannot be fully quantified how much of the project's remaining savings target of £0.700m (to be delivered over 2017/18 to 2018/19) is at risk due to stalled discussions with supported living housing providers on new schemes due to their concerns regarding the proposed plan to cap all rents to local housing allowance levels and introduce discretionary payments for higher rent schemes. This issue is also impacting on the <i>Reducing the Costs of Residential Placements - Younger Adults</i> project and Extra Care schemes that are part of the <i>Living at Home</i> project.</p>	<p>Following local and national lobbying, Central Government has announced that there will be no change to Housing Benefits Regulations in supported housing until 19/20, and that there will be a discretionary housing payment fund available after that date to top up rent payments.</p> <p>In addition, local mechanisms for assuring providers were approved by Policy Committee in October 2016.</p> <p>It is too soon to ascertain if the above measures will be enough to instil confidence back into the provider market, but five Invitations to Tender will be issued in January 2017 and, depending on the level of response to these, an indication on provider confidence can then be taken. In turn, this will inform how much of the remaining £0.700m remains at risk.</p> <p>However, of the £0.300m target for 2017/18, by the end of March 2017 £0.078m will already have been achieved through activity undertaken this financial year.</p>

Project	Reason for Exception	Mitigating Action
Reducing the Costs of residential Placements - Younger Adults	<p>£0.269m shortfall against the 2015/16 savings target. In addition, slippage of £0.545m is anticipated by year end, which will have to be made up in 2017/18 where there is no savings target. This figure is based on negotiations currently in progress being successfully completed and packages amended within anticipated timescales.</p> <p>Progress with negotiating and agreeing changes to care packages with providers remains slower than originally anticipated as this is the first detailed work of its kind with the residential market, requiring time to implement change management. For example, some providers are having to adjust business cases, re-train staff and consult with them over restructuring and rota changes. In some cases new models of care need to be slowly introduced.</p> <p>In addition, negotiations have to take account wider cost pressures and manage requests for increases as part of the reviews, particularly for placements where fee increases were not approved earlier in the year, other than where providers can evidence current prices are below market value.</p> <p>The proposed plan to cap all rents to local housing allowance levels and introduce discretionary payments for higher rent schemes is also having a knock on effect on this project.</p> <p>In its final year (2018/19), the project has a savings target of £0.500m. It cannot yet be quantified how much of this may be at risk due to the ongoing challenges.</p>	<p>Project staffing resource available to undertake provider reviews is being maximised by working flexible with the Promoting Independence in Supported Living and Outreach project, in order to deploy it effectively.</p> <p>The introduction of a Dynamic Purchasing System (which aims to streamline procurement for both suppliers and commissioners and offer flexibility) is being used to manage future fees and promote independence. This complements the ongoing use of the Care Funding Calculator for new placements. Providers are being asked to risk assess recommendations presented to them, where they are unwilling to implement changes.</p> <p>Support and training is being given to relevant providers on how to promote the independence of service users and build on people's strengths. Where viable, the use of Assistive Technology is being considered.</p> <p>The review work is providing the opportunity to talk to providers about the direction of travel and services required in the future. This should mean that, over time, the market can respond to the need for high quality services that aim to move people on, promoting independence and offering good value for money.</p> <p>Phase III of the project has now commenced, albeit later than originally anticipated. Some reviews undertaken during Phase I will be re-visited.</p> <p>The potential for joint reviews with Health colleagues is being discussed, where Continuing Healthcare funding is in place.</p> <p>The project's longer-term projections are being refined, in order to confirm the anticipated shortfall to the £2.000m target (2015/16 to 2018/19) by the end of the project.</p>

Project	Reason for Exception	Mitigating Action
Care and Support Centres (CSC)	There is the potential for delayed delivery of savings due to the linkage between the closure of care and support centres and the delivery of Extra Care schemes. The impact of this requires further assessment, and timescales may need to be adjusted accordingly in the future.	The impact of this, and the timing of establishing alternative services, e.g. short term beds, is being assessed.
Promoting Independence in supported living and outreach services	<p>Project status has changed to <i>Experiencing Obstacles</i> due to projected slippage of £0.180m from 2016/17 into 2017/18. The slippage is due to the following reasons:</p> <ul style="list-style-type: none"> • The review work was delayed in starting due to difficulties in recruiting to all the additional temporary Community Care Officer (CCOs) posts required. There are still some posts that have not yet been filled. • The CCOs have also initially had to target their reviews on services where providers did not feel able to make further savings, in order to support and evidence this. Whilst this work did not deliver savings, it was required in order to rule out some services from further targeted savings work in 17/18. 	<p>CCO staff already recruited are now fully trained. Further recruitment will take place in the New Year.</p> <p>Reviews continue in supported living schemes and engagement with providers is ongoing around potential reductions in packages.</p> <p>Supporting providers to use Assistive Technology to support people at night and joining up waking night support across services. This will be more effective at managing risks for some service users and has the potential to deliver significant savings.</p> <p>It is therefore felt that the slippage into 2017/18 can be made up, and all of the project's £1.701m savings target met by the end of the project.</p>

Project	Reason for Exception	Mitigating Action
Promoting Independent Travel	<p>The project's status has changed to <i>At Risk</i>. This is because, of the £0.191m savings target set for 2016/17, only between £0.010m to £0.025m is anticipated to be achieved by year end, ie a shortfall of up to £0.181m. It is also highly unlikely that the target of £0.389m for 2017/18 will be met.</p> <p>The revised transport criteria that supports delivery of the target savings was launched in July 2016. Due to a systems freeze, an interim assessment form had to be used initially. Using this form, between July and November 371 service users have had a transport eligibility assessment undertaken. Of these, 170 (46%) were eligible for transport support from the Council and 201 (54%) were ineligible. From data available up until the end of September, 64% of ineligible outcomes have been over-ridden in response to individual service user circumstances on a case by case basis. Some of these have been temporary over-rides, whilst activity to support independent travel is put in place.</p>	<p>The data on the outcomes of eligibility assessments up to the end of November will be analysed, as will data to year end, to understand if this level of over-ride remains. In addition, a range of mitigating activity has been identified, including:</p> <ul style="list-style-type: none"> • Dedicating review resource to target transport reviews. • Work is being undertaken to improve the eligibility assessment form. • An options report is to be taken to the Corporate Leadership Team for consideration, proposing a range of alternatives to support the department to achieve a balanced transport budget.
Further Expansion of Assistive Technology (AT) to Promote Independence	<p>Current saving projections from cases where AT has been used to either reduce current expenditure or avoid increased package costs indicated that the savings targets are being met. These savings are, however, subject to final validation by Finance colleagues. Until the savings are confirmed, the status remains <i>Experiencing Obstacles</i>.</p> <p>AT activity 35% up on the same period last year. This is positive in that more service users are able to access AT. However, it also creates higher ongoing liabilities associated with equipment / maintenance, etc. costs.</p>	<p>The project manager is confident that all of the project's savings are on target. Outcome of validation expected from Finance early in the New Year. It is anticipated that the project's status will revert back to <i>On Target</i>.</p> <p>Analysis of the longer term implications of increased AT activity is being undertaken in order to inform Senior Officer decisions regarding budgets and targeting of AT.</p>

Project	Reason for Exception	Mitigating Action
Older Adult Care Home Banding Rationalisation	<p>As originally reported, it was originally anticipated that the £0.100m savings target would be delivered by reviewing a small number of older adult placements where the residents are currently funded at a different fee level outside of the current bandings framework (i.e. service users who have entered long term care as a younger person and remained in the homes after reaching the age of 65).</p> <p>However, subsequent desk based research followed by reviews on relevant packages has shown that for most of the target cohort the reason why placements are funded at a fee level above the current bandings framework is due to either free nursing care contributions, dementia quality mark payments, or either service users, families or Health are paying the difference (ie there are legitimate reasons why the package fees are higher than the current bandings framework).</p> <p>Of those cases where savings are possible, these are compounded by complexities over funding arrangements where they are jointly funded with Health under Continuing Healthcare or under Mental Health legislation.</p> <p>In view of this, it is likely that most of the £0.100m savings are at risk.</p>	<p>Discussions are taking place with the CCGs around joint protocols and a review of guidance and practice is underway, together with consultation with CCGs on the proposed revised guidance is being undertaken.</p> <p>Any savings shortfall will be met by other underspends in the Community Care budgets.</p>
Reduction in Transport Budget	<p>This project aims to reduce the amount spent on adult social care transport by £0.150m over three years by reducing the number of fleet vehicles, using some vehicles for public transport routes, joining up transport with health services, where appropriate, and renegotiating external transport contracts.</p> <p>As of November 2016, projections suggest that only £0.088m of the total target will be achieved (all in 2016/17) which will result in a shortfall of £0.062m across the lifetime of the project.</p>	<p>As with the Promoting Independent Travel project, an options report is to be taken to the Corporate Leadership Team for consideration, proposing a range of alternatives to support the department to achieve a balanced transport budget.</p>

Project	Reason for Exception	Mitigating Action
Shared Lives	<p>There were delays with the recruitment of the full complement of additional staff required to support project delivery (a Support Officer and a Senior Co-ordinator). This was compounded by staff long term-sickness. This delayed the commencement of project activity by 9 months.</p> <p>The Shared Lives Team establishment remains below full complement, and the Team Manager post is now vacant.</p> <p>There is a risk of some of the £0.060m target savings for 2016/17 slipping into 2017/18.</p>	<p>The Team Manager post is to be recruited to over January / February but is not likely to be in place until April 2017. The 18.5 hour vacant post will also be recruited to within a similar timescale.</p> <p>Any shortfall against the £0.060m target savings for 2016/17 will be temporarily mitigated by an under-spend within the team's staffing budget.</p> <p>Longer-term, there is confidence that the £0.180m savings target can be achieved over the three year period 2016/17 to 2018/19.</p>

Redefining Your Council – Adult and Health Portfolio Q2 to September 2016

Progs.	<ul style="list-style-type: none">• Adult Social Care Strategy & market development – preventing & reducing care needs by promoting independence• Integration with health – implementing joined-up working practices and initiatives with health• Public Health Outcomes – working with key stakeholders to establish how to allocate the current budget• Care Act Implementation – implementing the changes needed for the next stage of the Care Act• Direct Services Provision – developing different ways of delivering services
Benefits to be delivered	<ul style="list-style-type: none">• Promoting independence and preventing, reducing and delaying the need for care and support (including providing information and advice to encourage people to look after themselves and each other)• Better and more joined-up working with partners (e.g. health) to improve outcomes for service users• More efficient, flexible and mobile staff by using technology to maximise staff time and help manage demand• Providing services that are creative, sustainable, value for money and legally compliant
<div><div>Key achievements in last 3 months</div><div><ul style="list-style-type: none">• Development of Nottinghamshire’s Sustainability and Transformation Plan (STP). The STP sets out how public sector organisations will work together over the next five years to close current gaps in Health and Wellbeing, Care and Quality and Finances.• The support plan, the tool used to plan the care and support required by individuals, has been re-developed to improve support planning with service users. It is outcomes based and looks for opportunities to maximise people’s independence. The process has been co-produced with service users, carers and staff.• A new community independence worker role has been designed to help maximise people’s independence by linking them to support available in their local community. Recruitment to these posts will take place shortly so that this work can progress further.• Ways have been identified to further improve working practice in Learning Disability services. This includes establishing a team of Promoting Independence Workers who will work directly with individuals to help them improve their independent living skills and to access the community independently.• Productivity has increased by 13% in older adults services through the use of new ways of working. These include: staff being able to work in a more mobile way by using tablets; the scheduling of appointments for individuals earlier in the customer pathway; the increased use of social care clinics and the introduction of a hub working model that means that different pieces of work are completed</div></div> <div><div>Expected delivery over next 3 months</div><div><ul style="list-style-type: none">• Submission of STP and embedding of the promoting independence and self-care approach in the STP Workstreams.• Training for Managers on how to use the new support plan to be rolled out with additional training for staff due in early 2017.• Training for frontline staff on risk assessments to ensure people are supported to live independently and allowed to take risks while being protected from significant harm.• Start work on the progression model, which identifies opportunities for people with a learning disability to progress towards a greater degree of independence.• A review of the Ways of Working programme will be undertaken to look at where greater benefits can be achieved and what else can be done to help people work more effectively. This will include opportunities to expand the scheduling of appointments, greater use of mobile devices in different settings and work to ensure that an enquiry is resolved at the earliest opportunity for individuals.• A trial of the Three Tier model to test out benefits. This model looks at having three conversations with people when they first enquire about care and support. The first conversation is around how we can help people to help themselves, the second is how we can help people for only as long as they need it and then a third conversation about ongoing support that is needed and how independence can be maximised.• Greater Nottingham Health and Care system will have an agreed joint</div></div>	

by different people to free up assessment capacity. This means that waiting lists have been reduced, people can be seen in a timelier manner and increases in demand area such as safeguarding can be supported.

- Scheduling of appointments rolled out to three Older Adults Social Work Teams and in Rushcliffe, Newark and Gedling Social Care Clinic Appointments can be booked in this way. As a result additional clinic appointments have been made available in Gedling to meet the demand for this new service.
- The Smart Ideas, staff suggestion scheme continues to provide ideas on how services could be improved. A recent suggestion that has been taken forward from a member of staff was an idea on creating an information leaflet for patients in hospital about Social Care, the number of options available and how to maintain independence. This is now being included as part of a wider communication campaign with Health colleagues in hospitals.
- The procurement process for the 0-19 Healthy Child Programme and Public Health Nursing Service was completed, with engagement from a panel which included CCGs and Children's Services. This new service will bring together care provided from Health Visitors and School Nurses as well as the Family Nurse Partnership Programme (for first time teenage mums) and the National Childhood Measurement Programme (which measures and weighs children at Reception and in Year 6).

integration programme commencing within the Rushcliffe Vanguard area.

- To have an agreed programme of sharing adult social care information for Nottinghamshire with our health partners for the purpose of delivering direct care.
- In Mid-Nottinghamshire, the Integrated Discharge Review will have been completed with a recommended option for implementation, to improve how people in hospital are supported as effectively and seamlessly as possible to get home and be able to remain at home safely.
- From the 31st October all older adults' occupational therapy teams across the county will offer scheduled appointments. Auto scheduling of appointments means people get an appointment for an assessment booked much earlier than previously. Generally for teams that operate this system people are offered appointments within 14 days which is a significant improvement on the 28 day agreed target.
- A strategy and action plan to reduce residential admissions in Mid-Nottinghamshire will have been produced and approved by all Better Together Alliance partners.
- Take forward identified areas where further integration between Health and Social Care across Nottinghamshire could contribute towards better outcomes and future savings. One area identified is a focus on the best pathways for service users on discharge from hospital.
- Approval sought from ASCH Committee for the reconfiguration of all the social care resources in Mid-Nottinghamshire and Bassetlaw which support people to recover their independent living skills. These staff are currently line-managed by a number of teams and the reconfiguration proposes to join these teams together to avoid being fragmented and to be responsive to demand. The reconfiguration will create a new Short Term Independence Service (STIS). Consultation has been held with staff to share information and determine next steps as well as success factors with the view to implementing the new STIS in the next quarter.
- Award contract and commence the mobilisation phase of the 0-19 Healthy Child Programme and Public Health Nursing Service in preparation for the new integrated service commencing from 1 April 2017, in order to ensure a smooth transition.

**Key risks
to
delivery**

- Managing demand for services when there are increasing pressures from rising demographics and increased responsibilities from legislation.
- Maintaining service quality as much as possible in the face of falling budgets and the continued need to find savings.
- Maintaining care provision in the face of increased costs and problems with staff recruitment and retention.
- Enabling alternatives to paid support through the development of community based support in order to reduce demand.
- Assessing impacts and ensuring that local adoption of nationally proposed health models support the Adult Social Care strategy and do not increase demand for social care services.

6 February 2017**Agenda Item: 8****REPORT OF SERVICE DIRECTOR FOR MID NOTTINGHAMSHIRE****UPDATE ON EXTRA CARE SERVICES IN NOTTINGHAMSHIRE****Purpose of the Report**

1. The purpose of this report is to:
 - request approval for the Council to enter into an agreement with Bassetlaw District Council regarding the creation of a new Abbey Grove Extra Care scheme in Worksop, as set out in this report, with the allocation of Extra Care capital funding at the level outlined in the **Exempt Appendix**.
 - provide information about the retender of the Care & Support service contract within the Council's existing Moorfield Court Extra Care scheme in Southwell.

Information and Advice

2. Some information relating to this report is not for publication by virtue of paragraph 3 of Schedule 12A of the Local Government Act 1972. Having regard to all the circumstances on balance the public interest in disclosing the information does not outweigh the reason for exemption because the information comprises commercially sensitive and confidential information about the Extra Care schemes. The exempt information is set out in the Exempt Appendix.

Worksop Extra Care

3. The new Abbey Grove Extra Care scheme in Worksop is proposed as part of the Council's Strategy for the additional development of new Extra Care accommodation across Nottinghamshire. The Council is committed to creating 160 new Extra Care places by March 2018 as part of its commitment to providing alternatives to residential care. To date 82 new Extra Care places have been created within four new schemes (St Andrew's, Bilsthorpe Bungalows, Darlison Court and Poppy Fields, including 12 apartments used for community based Assessment Accommodation at the latter scheme). A further 50 new Extra Care places have been approved by the Adult Social Care and Health (ASCH) Committee and are currently in development (Bowbridge Road Extra Care scheme and Townview, the former Mansfield General Hospital Extra Care scheme). The additional new Abbey Grove scheme proposed in this report would create 37 new Extra Care units, making an overall delivery of 169 new units of Extra Care across Nottinghamshire.
4. Extra Care accommodation, with its combination of communal facilities, on-site care team and specialist housing design helps to prevent and reduce the need for health and social care intervention. For example, accessible on-site communal facilities help to prevent

social isolation and promote mental and emotional wellbeing. The high quality of the accommodation is designed to meet the possible future needs of ageing residents (e.g. level access showers or wet rooms, wheelchair turning circles, lots of natural light, accessible kitchens, built-in call alarms etc). This standard of accommodation helps to prevent the need for health and social care intervention, for example, helping to prevent and reduce falls in the home. Overall, the support and preventative features offered by Extra Care means that all the older adults living in those schemes (both those in the Council's nomination units as well as those in the remainder of the units in a scheme) benefit from living in specialist accommodation designed to help older adults remain living at home safely for longer.

Proposal for a new Worksop Extra Care scheme

5. The current Abbey Grove scheme provides 32 bedsit properties for older adults, of which 25 units are used by the County Council as Extra Care accommodation. The scheme is managed by A1 Housing (the District Council's Housing Provider), with 24/7 on-site care provided by Comfort Call. The accommodation at Abbey Grove is in need of upgrade to ensure it can provide a safe and supportive Extra Care environment for older adults. Bassetlaw District Council and A1 Housing have advised that whilst Abbey Grove meets current fire safety regulations, the accommodation is not expected to meet future fire safety requirements as it has already been modified as much as is possible for that type of bedsit accommodation. It will therefore need to be rebuilt if there is to continue to be Extra Care in that location. As part of considerations regarding the future of Abbey Grove, the District Council and A1 Housing examined a number of possible options and concluded that the development of a larger Extra Care scheme would provide the best outcome in terms of being able to continue to deliver Extra Care in that location as well as providing an increase in the overall number of Extra Care places available for use by the County Council.
6. At its meeting in February 2015, ASCH Committee approved work with Bassetlaw District Council to develop a proposal for a new build Extra Care scheme in Worksop. A further report to ASCH Committee in June 2015 approved the submission of a joint bid with Bassetlaw District Council to the national HCA Care & Support Specialised Housing Fund for the development of new Extra Care within Worksop. On 10th March 2016 the HCA announced the award of grant funding of £1,056,000 conditional on a revised scheme design being submitted to the HCA for approval. A report to ASCH Committee in April 2016 provided an update on the further development work needed and required a report to be brought back to Committee in 2016 to provide detailed plans and financial implications for consideration to approve the allocation of capital funding.
7. Over the course of 2016, Bassetlaw District Council has undertaken further work to revise the scheme layout in order to be able to meet the design requirements of the HCA whilst also complying with the planning restrictions placed on the site due to its proximity to the nearby Gatehouse, which is a grade 1 listed structure. A revised design was shared with the County Council in August 2016 and has been assessed as meeting the county Extra Care design standard. The revised design was submitted to the HCA in September 2016, an update report was submitted to ASCH Committee in October 2016 and the HCA confirmed its approval for the new design in December 2016.

8. The proposed new Abbey Grove scheme would have a total of 51 new apartments for older adults, an increase of 19 on the current total capacity. Nottinghamshire County Council would have nomination rights to 37 of these for Extra Care accommodation, an increase of 12 from the existing arrangement, enabling more older adults to avoid unnecessary admission into residential care by being supported within Extra Care. The new building would also provide communal onsite facilities (café, lounge, multi-purpose hobby and leisure spaces) for use by Abbey Grove residents as well as the surrounding local older adults population, thereby helping to promote social and emotional wellbeing and prevent isolation and loneliness.
9. The District Council is currently applying for planning permission, with the intention that demolition of the old building and construction of the new building will start on site in Spring 2017, with the new scheme ready for use in Spring 2019. The expected timescales and key milestones for the proposed new Abbey Grove Extra Care scheme are as follows:

Planned activity	Suggested timeframe	Lead Partner
Consultation sessions in November held at Abbey Grove – including the issue of an information pack for all residents, tenants, carers & wardens re alternative accommodation choices	November 2016	A1 Housing with District and County Councils
HCA confirmation of design	December 2016	District Council
Costing finalised by District and put to Bassetlaw District Council Cabinet and ASCH Committee to seek approval to proceed.	Early 2017	A1 and District with County Council
Subject to approval to proceed by both Councils, residents needs to be assessed and residents supported to move to appropriate alternative accommodation	Spring 2017	A1 with District and County Council
Tender to appoint contractor for construction	Spring 2017	A1 with District
Demolition of existing Abbey Grove building and construction of new building	Spring 2017 – Spring 2019	Appointed contractor managed by A1 and District
Opening of new Abbey Grove scheme – with residents supported to move back into the new Abbey Grove building if they so choose	Spring 2019	A1 with District and County Council

10. The County Council's Older Adults Team for Bassetlaw will be a key partner in any arrangements made for the refurbishment of the Abbey Grove scheme. All existing Extra Care tenants will have a comprehensive assessment of their needs, in liaison with family and friends as appropriate. Bassetlaw District Council and A1 Housing will provide advice, support and practical assistance with the move for each individual and have identified options for alternative accommodation during the construction period:
- Westmorland House (an existing Extra Care scheme in Bircotes)
 - Larwood House in Worksop (an existing Independent Living scheme in Worksop, managed by A1 Housing. Provision would be made for the current Abbey Grove Care Team to be located on site at Larwood House as a temporary measure during the construction of the new Abbey Grove scheme).

11. Committee is requested to give approval for the Council to enter into an agreement with Bassetlaw District Council regarding the creation of a new Abbey Grove Extra Care scheme in Worksop with the allocation of Extra Care capital funding at the level outlined in the Exempt Appendix. The funding requested from the County Council equates to 36% of the total scheme cost for this proposed new Abbey Grove scheme.

Retender of Care & Support Contracts within Extra Care schemes

12. The Council's current contract for Home Based Care & Support within the Moorfield Court Extra Care scheme in Southwell is with Radis Community Care. This contract expires at the end of October 2017 and therefore needs to be retendered during 2017 in line with the Council's Financial Regulations and Procurement Law.
13. On 11 July 2016, ASCH Committee received a report about the Home Based Care & Support services tender and approved the establishment of a Dynamic Purchasing System (DPS) for the procurement of Home Based Care services including Extra Care services. The Dynamic Purchasing System is increasingly being used by Councils as it enables commissioners to establish a list of providers who have been accredited based on evidence and a track record of delivery of high quality care and support service. Commissioners can then select and award a contract/s to any of the accredited providers through mini competition as and where required. The Care & Support service contract at Moorfield Court will be the first Extra Care contract to be tendered under the new DPS.
14. To manage the transition to a new Moorfield Court Care & Support contract from November 2017, the Council will work closely with the existing provider to ensure that the retender process is managed carefully and to ensure that the continuity of the existing Extra Care service is maintained for the people using the service. The County Council will carry out a comprehensive assessment of the needs of all Moorfield Court Extra Care tenants, in liaison with family and friends. There will also be information events held at Moorfield Court for tenants, family and friends and the onsite Care Team at appropriate points during the retender process, as well as briefings for local Councillors, in order to ensure all local stakeholders have access to information, advice and support as required.

Other Options Considered

15. When deciding where to create new Extra Care accommodation, the location of existing schemes and local services, as well as demand/population demographics, are all considered by officers when making recommendations to Committee.

Reason/s for Recommendation/s

16. The Council's 'Living at Home' Programme (which manages the creation of new Extra Care schemes for the Council) is reducing the need for people to go into residential care by increasing alternative choices for older people to residential care and thereby delivering savings to the Adult Social Care and Health budget. The business case for the creation of new Extra Care, as developed in 2013/14, shows the net revenue saving to the County Council of placing an older adult in Extra Care (as opposed to residential care) is £94 per person per week, equating to an average annual saving of £4,888 per person per year.

Statutory and Policy Implications

17. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working 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

18. Following approval of the design by the HCA, Bassetlaw District Council has confirmed the minimum contribution required from the County Council to deliver the proposed new Abbey Grove Extra Care scheme. This is as set out in the Exempt Appendix and is within the range of approved County Council contributions to other new Extra Care schemes in Nottinghamshire.

Implications for Service Users

19. There are currently 20 older adults living at Abbey Grove, of whom 15 receive Extra Care support. Consultation events about the proposed redevelopment were held at Abbey Grove in November. Since then A1 Housing, supported by Nottinghamshire County Council Social Workers, has been leading dialogue with tenants, families and carers, in order to start to identify appropriate alternative accommodation for residents to move into during the construction works at Abbey Grove. In terms of experience of successfully supporting older people to move, the development of the St Andrew's Extra Care scheme (where residents were moved and the old building extensively remodelled to create a new scheme) demonstrated that careful planning and partnership working by the key organisations can ensure that older people are successfully supported to move in a sensitive and appropriate way.
20. The existing Abbey Grove onsite Care Team will be located at a temporary base in the nearby Larwood House older adults general needs scheme, in order that the Abbey Grove Extra Care tenants can continue to receive care support whilst the new Abbey Grove scheme is being built. A1 Housing has committed to meet the cost of tenants' moving expenses and existing Abbey Grove residents will be given priority to move back into the new Abbey Grove in Spring 2019. The creation of the new accommodation and improved new communal facilities will provide additional choice and opportunities for service users.

Public Sector Equality Duty Implications

21. In relation to the retender of the Moorfield Court Care & Support Contract, the nature of the services to be commissioned mean they will affect older adults and people with disabilities, including people who have multiple and complex health and social care needs. As part of the overarching retender of Home Based Care & Support Services, the Council has completed an Equalities Impact Assessment to consider the implications of the tender process on people with protected characteristics and to identify and put in place mitigating

action to ensure that these groups of people are not disadvantaged as a result of the tender process.

RECOMMENDATION/S

That the Committee:

- 1) gives approval for the Council to enter into an agreement with Bassetlaw District Council regarding the creation of a new Abbey Grove Extra Care scheme in Worksop, as set out in this report.
- 2) approves the allocation of Extra Care capital funding for the new Abbey Grove Extra Care scheme in Worksop at the level outlined in the Exempt Appendix.
- 3) notes the retender of the Care & Support service contract at the Moorfield Court Extra Care scheme in Southwell.

Sue Batty
Service Director for Mid Nottinghamshire

For any enquiries about this report please contact:

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Constitutional Comments (LM 16/12/16)

22. The recommendations in the report fall within the Terms of Reference of the Adult Social Care and Health Committee.

Financial Comments (KAS 23/01/17)

23. The financial implications are contained within paragraph 18 of the report and the exempt appendix.

Background Papers and Published Documents

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.

Update on the Development of New Extra Care Schemes for Nottinghamshire – report to Adult Social Care & Health Committee on 2 February 2015

Development of Proposals for New Extra Care Schemes for Newark, Worksop and Arnold – report to Adult Social Care & Health Committee on 29 June 2015

New Extra Care Schemes in Newark and Worksop – report to Adult Social Care and Health Committee on 18 April 2016

Update regarding new Extra Care schemes in Bassetlaw – report to Adult Social Care & Health Committee on 10 October 2016

Tender for older people's Home Based Care and Support services – report to Adult Social Care and Health Committee on 11 July 2016

Equality Impact Assessment

Electoral Division(s) and Member(s) Affected

All.

ASCH447

6 February 2017**Agenda Item: 9****REPORT OF CORPORATE DIRECTOR, RESOURCES****WORK PROGRAMME****Purpose of the Report**

1. To consider the Committee's work programme for 2017.

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 Chair and Vice-Chair, 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 revised committee arrangements in 2012, 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.

Other Options Considered

5. None.

Reason/s for Recommendation/s

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

Statutory and Policy Implications

7. 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

- 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, Resources

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 (NS)

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 Divisions and Members Affected

All.

ADULT SOCIAL CARE AND HEALTH COMMITTEE – WORK PROGRAMME

<u>Report Title</u>	<u>Brief Summary of Agenda Item</u>	<u>Lead Officer</u>	<u>Report Author</u>
13th March 2017			
Demonstration of OT videos			Steve Jennings-Hough
Performance Update for Adult Social Care and Health	Quarterly update report on the performance of Adult Social Care	Corporate Director, Adult Social Care, Health and Public Protection	Celia Morris/ Matthew Garrard
Extension of regional posts supporting the East Midlands Improvement Programme	Report to request 12 months extension for the two fixed term posts of East Midlands Improvement Programme Manager (Care and Health) and Business Support Administrator, until 31st March 2018	Corporate Director, Adult Social Care, Health and Public Protection	Lee Harrison
Transforming Care update	Progress report on work of Transforming Care programme.	Service Director, Strategic Commissioning, Access and Safeguarding	Cath Cameron-Jones
Progress with development of Short Term Independence Services	Update on development of this service, to include information on number of people awaiting Extra Care.	Service Director, Mid-Nottinghamshire	Karen Peters/Rebecca Croxson
Outcome of review of new ways of working within adult social care		Service Director, Mid-Nottinghamshire	
Fee changes for care providers 2017	Annual report on changes proposed to fees paid to care providers by the Council, and to include the outcome of the independent review of fees paid to bands 4 and 5 care homes.	Service Director, Strategic Commissioning, Access and Safeguarding	Caroline Baria/Cherry Dunk
Adult Social Care and Health – overview of developments	Overview report on current developments and activities across adult social care and health services; including update on carers' strategy and services, Deprivation of Liberty Safeguards update and confirmation of structure of Adult Deaf and	Corporate Director, Adult Social Care, Health and Public Protection	Jennie Kennington

<u>Report Title</u>	<u>Brief Summary of Agenda Item</u>	<u>Lead Officer</u>	<u>Report Author</u>
	Visual Impairment Service.		
18th April 2017			
Defence Medical Welfare Service bid to develop Aged Veterans Services in Nottinghamshire		Service Director, Mid-Nottinghamshire	Lyn Farrow
Update on the work of the Health and Wellbeing Board	Update on work of Health and Wellbeing Board over the last 6 months	Corporate Director, Adult Social Care, Health and Public Protection	Jennie Kennington
Quality and Market Management Team Quality Auditing and Monitoring Activity	Update report	Service Director, Strategic Commissioning, Access and Safeguarding	Diane Clayton/ Cherry Dunk
Progress with development of Personal Health Budgets	Update report on the progress with increasing the number of PHBs in Nottinghamshire.	Service Director, Strategic Commissioning, Access and Safeguarding	Kate Rush
Transitions work: development of performance measures	Following on from update report in January, further work requested on development of appropriate performance measures with focus on working with young people at 14 years.	Service Directors, Mid-Nottinghamshire and North Nottinghamshire and Direct Services	Paul Johnson/Sue Batty/Ainsley MacDonnell
Review and impact of additional staffing for winter pressures	Report on impact of temporary social work and community care officer capacity approved at Dec 2016 committee to deal with winter pressures.	Service Director, Mid Nottinghamshire	Wendy Lippmann/Sue Turner
Outcome of review of discharge arrangements at King's Mill Hospital and investment in appropriate social care resources.	Report on the outcome of the review and recommendations for re-investing NCC funding in additional social care staff to meet increasing demands in the service.	Service Director, Mid Nottinghamshire	Wendy Lippmann
12th June 2017			
Care Act and Adult Social Care Strategy update	Update on progress in relation to embedding the Care Act and the ASC Strategy.	Programme Director, Transformation	Stacey Roe/ Bronwen Grieves

<u>Report Title</u>	<u>Brief Summary of Agenda Item</u>	<u>Lead Officer</u>	<u>Report Author</u>
Update on two integrated health and social care schemes (SCOPES and EOSS)	Progress report on work of two integrated health and social care schemes supporting prompt discharge from hospital.	Service Director, Strategic Commissioning, Access and Safeguarding	Claire Bearder
Savings and efficiencies delivery group – update report	Progress report on the work of the delivery group.	Programme Director, Transformation	Ellie Davies
Personal Outcomes Evaluation Tool (POET) survey – implementation of outcomes update	Report on implementation of outcomes	Service Director, Strategic Commissioning, Access and Safeguarding	
10th July 2017			
Adult Social Care and Health – Overview of developments		Corporate Director, Adult Social Care, Health and Public Protection	Jennie Kennington
Outcome of the quality assurance work on safeguarding	Report on the outcomes of the work led by external partners to review the safeguarding work of the department.	Service Director, Strategic Commissioning, Access and Safeguarding	Claire Bearder/Stuart Sale
Progress report on the development of Community Living Network services	Update on the work to introduce Community Living Network services in the county.	Service Director, North Nottinghamshire & Direct Services	Mark Jennison-Boyle
To be placed			
Appropriate Adults Service		Service Director, Strategic Commissioning, Access and Safeguarding	Gill Vasilevskis
Update on possible transfer of Attendance Allowance to local authorities	Outcome of national consultation and update on government plans in relation to AA.	Service Director, Strategic Commissioning, Access and Safeguarding	Paul Stafford
Update on transfer of ILF	Regular update on transfer of Independent Living Fund to the Council (Sept 2017)	Service Director, Mid Nottinghamshire	Paul Johnson

<u>Report Title</u>	<u>Brief Summary of Agenda Item</u>	<u>Lead Officer</u>	<u>Report Author</u>
New Extra Care schemes in Newark and Worksop	Report to present detailed plans and seek approval of capital funding	Service Director, Mid Nottinghamshire	Rebecca Croxson
Stakeholder engagement – proposed re-design	To outline future proposals for better engagement with all stakeholders, particularly service users and carers through co-production	Service Director, Strategic Commissioning, Access and Safeguarding	Felicity Britton
Deprivation of Liberty Safeguards update	Six monthly progress report on work to manage DoLS assessments and reviews.	Service Director, Mid Nottinghamshire	Daniel Prisk
Business case for the proposal to transfer a range of adult social care directly provided services into an alternative service delivery model	Report to present detailed description of options available to the Council and outline plans for implementation, with recommendations for Committee to consider	Service Director, North Nottinghamshire & Direct Services	Ian Haines/ Jennifer Allen
Savings Review Delivery Group – update	Progress report on the work of the Board.	Service Director, South Nottinghamshire and Public Protection	Mark McCall/ Paul McKay