

Departmental Quarterly Monitoring Report

Directorate: Community Directorate

Department: Prevention and Assessment Services

Period: Quarter 1 - 1st April 2011 – 30th June 2011

1.0 Introduction

This monitoring report covers the Prevention and Assessment Services first quarter period up to 30th June 2011. It describes key developments and progress against objectives and performance indicators for the service.

The way in which symbols have been used to reflect progress is explained within Appendix 5.

2.0 Key Developments

Self Directed Support

The Self Directed Support and Resource Allocation policies and procedures have been completed and agreed by the Health Policy and Performance Board. The documents have been distributed to the operational teams and are available on the intranet. The self-directed support process including support planning is now embedded in the care management process. The processes and documentation are reviewed and updated on an ongoing basis following learning and developing new ways to improve the process accordingly.

Direct Payments

Direct payments continue to be an important strand within self directed support. The directorate teams continue to promote the use of direct payments to enable individuals and their carers to exercise choice and control.

Brokerage Pilot

Halton in conjunction with the Merseyside improvement and efficiency project, St Helens, Liverpool and Knowsley have developed a model to provide support brokerage to individuals receiving an indicative budget across all the authorities. This is an ongoing piece of work and Halton have specifically commissioned Halton Speak Out to deliver this locally. The pilot has been completed and the learning has been evaluated. The learning will inform future commissioning decisions.

Social Care in Practice 'SCIP'

The Social Care in Practice project was commissioned by the Runcorn Practice Based Commissioning Consortium in February 2008 and has run as a pilot to February 2011. The project has established formal links between Primary Care and Social Services within Runcorn, to reduce the barriers for health professionals referring people for social care issues, to provide more holistic assessments and enable more joint working. The Practice Based Commissioning Consortium has agreed to this project being extended for a further two years with an additional third year, subject to review. The Contract arrangements are being finalised. The Social Care staff that are now in place and some in recruitment stage. They will be co-located with District nurses and Community Matrons within general practices, and work closely with them to deliver services and support to the older practice population.

Integrated Hospital Discharge Teams Warrington and Whiston Hospitals

The Integrated Discharge Teams at Warrington Hospital and Whiston Hospital became operational during this period. Both teams involve joint work and agreements across 4 Borough Councils, 3 Primary Care Trusts, 2 Acute Hospitals and 1 Community Health Healthcare provider. The work of the teams is monitored through local performance indicators and the regional work undertaken by ADASS and AQuA.

Six Lives

Work is ongoing to ensure progress is maintained in responding to the Ombudsman's Report Six Lives. Work required primarily relates to healthcare services access/reasonable adjustments and Mental Capacity Act and has begun to be progressed through the multi-agency Healthcare for All sub group of the Partnership Board. They oversee an action plan which is reviewed regularly, their representative Commissioner in Health, has written to the NHS trust re Six Lives progress report, which makes specific reference to the DDA and how the trusts intend to take forward the report. Paper copies of Health Passports have been received and the electronic versions are now available. Training sessions are being carried out at Whiston Hospital within the mandatory safeguarding training. Further in-depth training for staff is being explored with local community learning disability nurses. Whiston has signed up to the 'Getting it right' charter and progress is monitored via the Whiston Pathway group.

Hearing Impairment Service

This service is now operational following consultation on the development of hearing impairment services a joint Children's and Adults specification has been agreed. A tendering process was undertaken for the provision of hearing impairment services and the contract was awarded to Deafness Resource Centre who will start working with Children's and Adult services from 1st April 2011. The Joint Commissioning Manager for Disabled Adults has also been invited to sit on the PCT Audiology Procurement Group. The staff have been recruited. They have been successful in securing carers grant funding to establish self-help groups locally.

Sensory Services

i) PCT led Audiology Procurement Group

Now meeting regularly to relocate some hospital based services into the community. Halton residential care providers appear to be supportive of their staff being trained in re-tubing hearing aids to avoid the need for them to be sent away.

ii) PCT led Low Vision Project

Pathways are fragmented and need to be redesigned in line with the UK Vision Strategy. Clarification of roles and responsibilities of community based support will fill gaps in services whilst avoiding overlap. This may impact on the Visual Rehab Officers in Physical and Sensory Disabilities who along with Commissioning are part of the group undertaking the review.

Modernisation of Oakmeadow

The Business Plan for Oakmeadow has been completed and agreed at Executive Board. Working groups have been established to implement the business plan. There have been changes to the bed base at Oakmeadow to support the development of intermediate short term care. There is a refurbishment plan which will support the development of Oakmeadow as a hub for a range of community based services and a venue for local groups to use which will also include a community café.

Reablement and End of Life Care

Reablement and Section 256 funding has been agreed with the PCT and signed off at Executive Board.

The contract for the End of Life Service, which is commissioned by the PCT, has been agreed for three years with an increase in the number of hours care commissioned. A social Worker Palliative Care has been recruited to a two year post to work as part of a multi- disciplinary team within Halton Haven Hospice.

Resource Directory

The first phase of three - the My Life portal is now live on the internet. Workshops were held to inform staff and leaflets were designed for distribution. Quick search links have been approved by Adults and Community senior management which will further improve the service.

3.0 Emerging Issues

Integrated Assessment Team

There is a strategic approach and continued modelling to look at the development of a generic duty team to be based with and work alongside, the re-ablement team. They would provide better sign posting, initial assessment and safeguarding, linked closely to the development of Carefirst 6. This now begins to look holistically at the pathways into complex needs services. The detail relating to the modelling of this service is in progress.

Integrated Adult Learning Disability Team

The Integrated Adult Learning Disability Teams, Health Team, are working within the GP's surgeries to ensure that the Learning Disability register held by the surgery are up to date and people on the register are invited to attend for their health check, in line with the Directed Enhanced Service (DES). Health promotion workshops for groups of men and women have been carried out within day services. An event was carried out with Halton Adult Learning Disability Support, (HALDS), a local family and carers support group. The anticipatory Care Calendar via Merseyside and Cheshire Cancer network is being progressed through the supported housing network in Halton. This development will be rolled out further.

ALD Partnership Board 2010/11 Annual Report

A template has now been received which is simplified from last year. The deadline for submission is late July 2011. The template has been completed and circulated to members of the Partnership Board and an accessible version prepared for the Peoples Cabinet, comprised of Self Advocates, people with learning disabilities and will be submitted to Partnership Board in July.

Integration of Health and Social Care Services

Work has commenced with health commissioners and providers to transform community services. The aim of the work is to develop community multi-disciplinary teams that will draw on a range of services and professional staff to meet the needs of individuals. This will be developed over the next 2 years.

Integration of Sensory Services

Following on from a consultation in 2010/11, a range of services are developing a model of integration to improve the accessibility and diversity of provision for people with sensory impairments.

4.0 Service Objectives / milestones

4.1 Progress against 'key' objectives / milestones

Total	5		5		0		0
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All the key objectives/milestones are on track. Details can be found in Appendix 1.

4.2 Progress against 'other' objectives / milestones

Total	9		9		0		0
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All other objectives/milestones for the Department are on track to be achieved and are therefore not being reported by exception at this time.

5.0 Performance indicators

5.1 Progress Against 'key' performance indicators

Total	6		5		1		0
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Of the six reportable 'key' indicators five are on or above target.

One indicator is currently uncertain to reach its target (PA28 – Repeat incidents of Domestic Violence) as performance depicts an increase on the same period in the previous year.

Further details can be found in Appendix 2.

5.2 Progress Against 'other' performance indicators

Total	41		12		1		0
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Twelve 'other' indicators are on or above target therefore are not being reported by exception at this time. One 'other' indicator is uncertain at this stage whether it will reach its target (PA 22 - Percentage of adults assessed in year where ethnicity is not stated) as the level of unknown ethnicity is high in Quarter 1. However, the Performance & Improvement Team are reporting monthly exceptions to operational teams in order to address this. Further information is available within Appendix 3.

Information for 28 'other' indicators is awaited from partner agencies. With the change from the National Indicator Set, to the new Adult Social Care Outcomes Framework (ASCOF), some indicators are survey indicators which are reported annually; therefore information will not be available until year end. However, it is anticipated that some of the new indicators will be available for reporting in Quarter 2.

6.0 Risk Control Measures

During the Development of the 2011-12 Service activity, the service was required to undertake a risk assessment of all Key Service objectives.

Where a Key service objective has been assessed and found to have an associated 'High' risk, progress against the application of this risk treatment measures will be reported in quarters 2 and 4.

7.0 Progress against high priority equality actions

The Department is currently seeking to review equality actions across the Directorate to determine whether there are any which are 'high priority'. Where a Key service objective has been assessed and found to have an associated 'High' priority, progress will be reported in quarters 2 and 4.

8.0 Data quality statement





The author provides assurance that the information contained within this report is accurate and valid and that every effort has been made to avoid the omission of data. Where data has been estimated, sourced externally, or where there are any concerns regarding the limitations of its use this has been clearly annotated.

9.0 Appendices

- Appendix 1 Progress against 'key' objectives / milestones
- Appendix 2 Progress against 'key' performance indicators
- Appendix 3 Progress against 'other' performance indicators
- Appendix 4 Financial Statement
- Appendix 5 Explanation of use of symbols


Appendix 1: Progress Against 'key' objectives / milestones

Ref	Objective
Service Objective: PA 1	Working in partnership with statutory and non statutory organisations, evaluate, plan, commission and redesign services to ensure that they meet the needs and improve outcomes for vulnerable people

Milestones	Progress Q 1	Supporting Commentary
Commence implementation of the Early Intervention/Prevention Strategy to improve outcomes for Older People in Halton. Mar 2012. (AOF6 & 7)		Action plan has been agreed through the Prevention and Early Intervention Steering Group. The action plan implementation has begun and is being overseen through three steering groups; Telecare, Prevention in Partnership and Intergenerational. A Gantt chart outlining detailed progress against outcomes is available.
Commence implementation of Telecare strategy and action plan. Mar 2012. (AOF 6 & 7)		Telecare Implementation Group established. Telecare team recruitment ongoing.
Continue to establish effective arrangements across the whole of adult social care to deliver self directed support and personal budgets. Mar 2012 (AOF6)		Effective arrangements established and incorporated in care management arrangements. Further development is underway within Intermediate Care services.
Review and evaluate new arrangements for integrated hospital discharge Team. Mar 2012. (AOF 6&7)		Work streams established with progress on the model for Care and Support Team.




Appendix 1: Progress Against 'key' objectives / milestones

Ref	Objective
Service Objective: PA 1	Working in partnership with statutory and non statutory organisations, evaluate, plan, commission and redesign services to ensure that they meet the needs and improve outcomes for vulnerable people

Milestones	Progress Q 1	Supporting Commentary
Commence implementation of Business Plan for Oak meadow. Mar 2012. (AOF 6&7)		<p>The Business Plan for Oakmeadow has been completed and agreed at Executive Board. Working groups have been established to implement the business plan.</p> <p>There have been changes to the bed base to support the development of intermediate care and there is a refurbishment plan, which will support the development of Oakmeadow as a hub for a range of community based services and a venue for local groups to use which will also include a community café.</p>





Appendix 2: Progress Against 'key' performance indicators

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
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Cost & Efficiency							
<u>PA 1</u>	Numbers of people receiving Intermediate Care per 1,000 population (65+) (Previously EN 1)	98.07	99	25.02			This is a cumulative figure and equates to 428 people in receipt of intermediate care in the 65+ age bracket.
<u>PA 5</u>	Percentage of people fully independent on discharge from intermediate care/reablement services	-	40%	41%		N/A	The figure for quarter 1 relates to people discharged from the service during the period. As this is being reported for the first time, a Direction of Travel indicator cannot be determined.



Appendix 2: Progress Against 'key' performance indicators



Ref	Description	Actual 2010/11	Target 2011/12	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
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Service Delivery							
<u>PA 6</u>	Number of people receiving Telecare Levels 2 and 3	166	164	44			166 people received a service during 2010/11. In the first quarter of this year there have been 44 new connections. A continued increase in referrals and subsequent connection onto service indicates that target for the year will be achieved.
<u>PA 8</u>	Percentage of VAA Assessments completed within 28 days (Previously PCS 15)	78.12	80	83.33%			Target exceeded. 36 completed cases for Quarter 1. Of which 30 were completed within 28 days. Staff continue to work with the performance team to ensure assessment timescales are being met.


Appendix 2: Progress Against 'key' performance indicators

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
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Quality							
PA 14	% of items of equipment and adaptations delivered within 7 working days (Previously CCS 5)	96.65	96	97.92			Q1 has shown a positive start to the year with an improvement on the same quarter last year. Staff continue to work with the performance team to ensure any exceptions to the 7 day timetable are investigated so that any similar problems do not reoccur.

Area Partner Local Indicator							
PA28	Repeat incidents of domestic violence (Previously NI 32)	Q4 = 29% End of year average = 25%	27%	28%			<p>In real terms, the number of repeat incidents has remained roughly the same, (42 this year compared to 39 last year), but the percentage has risen to 28% this quarter compared to 22% for the same quarter last year.</p> <p>This is due to the fact that the overall number of cases, (152 cases for the last 12 month compared to 175 cases for the same 12 months the previous year), has dropped; but fewer overall cases is a positive trend.</p>

Appendix 3: Progress Against 'other' performance indicators

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
Fair Access							
PA 22	Percentage of adults assessed in year where ethnicity is not stated Key threshold <10% (Previously PCS 4a)	0.9	0.5	10.14	?		The number of clients assessed where ethnicity is not stated relates to 28 clients. Exception reports are produced of these clients for Administration teams to action to ensure target will be met at year end.

Appendix 4: Financial Statement

COMMUNITIES- PREVENTION & ASSESSMENT Revenue Budget as at 30th June 2011

	Annual Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance To Date (overspend) £'000	Actual Including Committed Items £'000
Expenditure					
Employees	7,063	1,708	1,732	(24)	1,757
Other Premises	67	11	10	1	42
Supplies & Services	576	220	200	20	367
Transport	65	10	10	0	10
Food Provision	19	5	7	(2)	11
Aids & Adaptations	113	20	19	1	19
Contribution to JES	231	0	0	0	0
Unapportioned Grants	800	0	0	0	0
Community Care:					
Residential & Nursing Care	7,965	1,730	1,876	(146)	1,876
Homecare & Supported Living	6,817	1,338	1,446	(108)	1,446
Direct Payments	2,463	650	646	4	646
Day Care	243	56	66	(10)	66
Key Safe Expenditure	21	5	5	0	5
Other Agency	124	30	34	(4)	34
	2,281	541	536	5	589
Contribution to Intermediate Care Pool					
Total Expenditure	28,848	6,324	6,587	(263)	6,849
Income					
Other Fees & Charges	-301	-36	-46	10	-46
Sales Income	-25	-13	-13	0	-13
Reimbursements	-2,250	-473	-473	0	-473
Residential & Nursing Income	-2,421	-562	-565	3	-565
Community Care Income	-526	-131	-121	(10)	-121
Direct Payments Income	-82	-21	-32	11	-32
Transfer from Reserves	-330	0	0	0	0
LD & Health Reform Allocation	-4,272	0	0	0	0
Total Income	-10,207	-1,236	-1,250	14	-1,250
Net Controllable Expenditure	18,641	5,088	5,337	(249)	5,599
Recharges					
Premises Support	308	73	73	0	73
Asset Charges	160	3	3	0	3
Central Support Services	2,622	634	634	0	634
Transport	79	21	21	0	21
Internal Recharge Income	-420	0	0	0	0

Appendix 4: Financial Statement

Total Recharges	2,749	731	731	0	731
Net Departmental Total	21,390	5,819	6,068	(249)	6,330

Comments on the above figures:

Net Controllable Expenditure for Quarter 1 is £249,000 over budget profile excluding the Intermediate Care Pool. This is due in the main to expenditure on the Community Care budget being considerably more than anticipated at this time of year.

Staffing is currently showing £24,000 over budget profile. The total savings target for the Department is £321,000, which contributes to the overall corporate savings target. This equates to £80,250 for the first quarter, therefore £56,250 of the savings have been achieved in quarter 1.

The figures above include the income and expenditure relating to the Community Care budget which is currently £256,000 (net) over budget profile. The pressures experienced during the last financial year have continued and the number of people now receiving a social care service has significantly increased from 2009/10. These figures will fluctuate throughout the year depending on the number and value of new packages being approved and also existing packages coming to an end. Information is currently being analysed to determine the cause for the increase and to ascertain whether this trend will continue through the remainder of the year. This area will be carefully monitored throughout the year and remedial action is being taken to bring expenditure back in line with budget.

Other expenditure headings are generally in line with budget at this point in time. Staffing budgets must be carefully managed in order to ensure staff savings targets are achieved and a balance budget is achieved at year end.

Contribution to Intermediate Care Pooled Budget

Revenue Budget as at 30th June 2011

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
<i>Expenditure</i>					
Employees	1,138	446	443	3	492
Supplies & Services	439	6	6	0	8
Transport	9	3	3	0	5
Other Agency Costs	275	2	0	2	0
Total Expenditure	1,861	457	452	5	505
<i>Income</i>					
Total Income	-113	0	0	0	0

Appendix 4: Financial Statement

Net Controllable Expenditure	1,748	457	452	5	505
Recharges					
Asset Charges	0	0	0	0	0
Central Support Charges	252	65	65	0	65
Departmental Support Services	204	0	0	0	0
Premises Support	77	19	19	0	19
Total Recharges	533	84	84	0	84
Net Departmental Total	2,281	541	536	5	589

Comments on the above figures:




In overall terms revenue spending at the end of quarter 1 is £5,000 below budget profile.

Capital Budget as at 30th June 2011

	2011/12 Capital Allocation £000	Allocation To Date £000	Actual Spend To Date £000	Allocation Remaining £000
<i>Social Care & Health</i>				
Oakmeadow Phase 2	28	7	0	28
Total Spending	28	7	0	28




Appendix 5: Explanation of Symbols

Symbols are used in the following manner:

Progress	<u>Objective</u>	<u>Performance Indicator</u>
Green	 Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber	 Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage</u> whether the annual target is on course to be achieved.</i>
Red	 Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved</u> unless there is an intervention or remedial action taken.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green	 Indicates that performance is better as compared to the same period last year.
Amber	 Indicates that performance is the same as compared to the same period last year.
Red	 Indicates that performance is worse as compared to the same period last year.
N/A	Indicates that the measure cannot be compared to the same period last year.