

Central
Bedfordshire
Council
Priory House
Monks Walk
Chicksands,
Shefford SG17 5TQ



**TO EACH MEMBER OF THE
SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE**

14 October 2010

Dear Councillor

**SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE - Monday
18 October 2010**

Following Chairman's Briefing and further to the Agenda and papers for the above meeting, previously circulated, please find attached the following additional information for consideration at the meeting:-

10. Quarter 1 Performance Monitoring Report

Please find attached the report and appendix which marked "To Follow" on the agenda.

15. Pharmacy Needs Assessment (PNA)

Please find attached a copy of the presentation slides.

17. NHS Bedfordshire Estates Strategy

Please find attached a copy of the presentation slides.

Should you have any queries regarding the above please contact Democratic Services on Tel: 0300 300 4032.

Yours sincerely

Martha Clampitt,
Democratic Services Officer
email: martha.clampitt@centralbedfordshire.gov.uk

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Meeting: Social Care, Health & Housing Overview & Scrutiny Committee
Date: 18 October 2010
Subject: Quarter One Performance Report
Report of: Cllr Mrs Rita Drinkwater, Portfolio Holder for Housing and Cllr Mrs Carole Hegley, Portfolio Holder for Social Care and Health
Summary: The report highlights the Quarter One performance for Social Care, Health and Housing for the Council.

Advising Officer: Julie Ogley , Director of Social Care, Health & Housing
Contact Officer Althea Mitcham, Head of Business Infrastructure
Public/Exempt: Public
Wards Affected: All
Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

The quarterly performance report underpins the delivery of the Council's priorities.

Financial:

No direct implications.

Legal:

No direct implications.

Risk Management:

Areas of ongoing underperformance are a risk to both service delivery and the reputation of the Council.

Staffing (including Trades Unions):

No direct implications.

Equalities/Human Rights:

This report highlights performance against performance indicators which seek to measure how the Council and its services impact across all communities within Central Bedfordshire, so that specific areas of underperformance can be highlighted for further analysis/drilling down as necessary.

As such it does not include detailed performance information relating to the Council's stated intention to tackle inequalities and deliver services so that people whose circumstances make them vulnerable are not disadvantaged. The interrogation of performance data across vulnerable groups is a legal requirement and is an integral part of the Council's equalities and performance culture which seeks to ensure that, through a programme of ongoing impact assessments, underlying patterns and trends for different sections of the community identify areas whether further action is required to improve outcomes for vulnerable groups.

Community Safety:

No direct implications.

Sustainability:

No direct implications.

RECOMMENDATION(S):

- 1. That the committee notes and considers this report.**

Introduction.

1. The Council's framework for performance management supports the delivery of the Council's priorities.
2. Those indicators identified by the Director as 'critical' form the quarterly corporate performance suite – included at Appendix A.
3. SCHH has demonstrated a significantly improved level of performance regarding the average time taken for SOVA investigations. Although there has been an increase in the demand for services and the numbers of cases progressing to SOVA inspections, the average time taken to complete an investigation is good and has improved when compared to the previous quarter. This improved performance is as a direct result of effective strategic management, process design and the effective professional development of Social Care staff.

Director's Summary

4. Following a review of the information reported to the council, Social Care, Health and Housing are presenting a more condensed set of indicators that reflects the priorities of the directorate

5. However as a result of the disaggregation of Swift, to create a separate Social Care database for Central Bedfordshire, there have been problems obtaining some performance information for Adult Social Care for this report. ICT are working with Igneous, the suppliers of the reporting software, to resolve the problem.
6. Where performance information has been obtained, performance continues to improve for clients receiving self directed support and SOVA investigation. Due to the reporting issues, the causes for the dip in performance on carers' reviews can not be identified, but will be investigated once the information is available.
7. Performance information on achieving independence (NI 125) will be available from Q2, following the resolution of the issues in relation to definition and methodology of the indicator with Health.
8. Whilst decent homes performance appears to have deteriorated, this is as a result of properties becoming non-decent in April. This increase was anticipated and these properties were included in the decent homes programme this year. The service is confident that it can achieve the national target of no non-decent homes by the end of 2010.

Areas of strong performance

9.
 - Average time taken for SOVA investigations has seen a marked improvement.
 - People supported to live independently has seen a marked improvement.
 - Number of households living in temporary accommodation shows improved performance with its target having been reached.

Conclusion and Next Steps

10. That Social Care, Health and Housing Overview and Scrutiny Committee notes and considers this report.

Appendices:

Appendix A – (Quarter 1 Performance Indicators)

Background Papers: (open to public inspection)

None

Location of papers:

Priory House, Chicksands, Bedfordshire

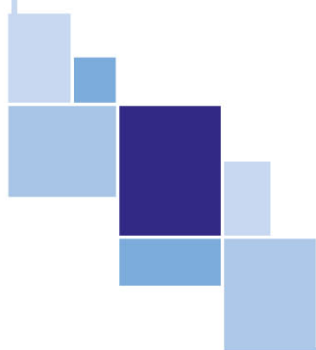
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Indicators	Linked to LAA	CiPFA Comparator Group 08/09	Unit	Good is	Outturn 09/10	Quarter 1 Apr -Jun	Quarter 2 Jul - Sept	Quarter 3 Oct - Dec	Quarter 4 Jan - Mar	Trend Comparison	Year to Date	Performance Judgement (Q compared with Q)	Target 10/11	Comments
NI 130 - Clients receiving self directed support	Yes	5.6%	%	High	14.40%	15.91%	-	-	-	Qtr on Qtr	15.91%	↑A	30%	Progress continues to be made with a 300+ indicative budgets having been agreed and awaiting the finalisation of the support plan.
NI 135 - Carers receiving needs assessment or review & a specific carer's service, or advice and information	Yes	18.3%	%	High	23.90%	22.21%	-	-	-	Qtr on Qtr	22.21%	↓A	30%	The dip in performance is being investigated and action has been taken to remind all workers of the importance of recording carers assessment and services.
Average time taken for SOVA investigation (days)	No	NA	No. Days	Low	38	25	-	-	-	Qtr on Qtr	25	↑G	30	Performance has improved when compared to last quarter.
NI 136 - People supported to live independantly (per 100,000 pop)	No	3558	No.	High	3,435	3,668	-	-	-	Qtr on Qtr	3,668	↑G	4,295	Performance has improved when compared to last quarter.
NI 156a - Number of households living in temporary accomodation	No	107	No.	Low	32	26	-	-	-	Qtr on Qtr	26	↑G	47	Due to successful homelessness prevention measures, this figure is being successfully managed. However, this is a volatile indicator and liable to fluctuation at short notice.
NI 156b - Number of households living in temporary accomodation (households with dependants / pregnant)	No	NA	No.	Low	22	18	-	-	-	Qtr on Qtr	18	↑G	30	
NI 158 - Percentage of non decent homes (Council stock)	No	17.6%	%	Low	0.60%	4.70%	-	-	-	Seasonal Quarter (Q1 2009/10 = 1.5%)	4.70%	↓G	Profile Target Q1: 4.7% Q2: 2.3% Q3: 0.0% Q4: 0.0%	Increase from the end of year position due to properties becoming non-decent this year. All identified properties have been included in this year's decent homes programme. Performance against the national average and comparator groups remains very strong and the service is confident of achieving the national target by 31st December 2010.

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Pharmaceutical Needs Assessment – NHS Bedfordshire

Belinda Ekuban - PNA Project Lead



Background

- What is a PNA?

An assessment of the pharmaceutical needs of our PCT area

- The PCT have a statutory requirement under the amended Pharmaceutical Regulations to publish a Pharmaceutical Needs Assessment by 1 February 2011
- Clear guidance have been issued by DoH on the development of PNAs on the Standards, minimum contents and level of stakeholder engagement
- PNAs have to be revised at least every 3 years

- **Pharmaceutical needs** - A health need that can be met by the provision of pharmaceutical services.
- **Pharmaceutical services** – three tiers
 - Essential Services
 - Enhanced Services
 - Advanced Services

The main focus of the PNA is to assess the Enhanced services required to meet local pharmaceutical needs.

Legislation

- Health Act 2009 contains 2 clauses
 - To develop and publish pharmaceutical needs assessments.
 - To use PNAs as the basis for determining market entry to NHS pharmaceutical services provision.
- Amended Pharmaceutical Regulations for publishing PNAs
 - Minimum content.
 - Minimum consultation required.
 - life of a PNA/timelines

Processes in PNA Development

- Stakeholder engagement
- Identifying local needs
- Mapping current provision
- Identifying unmet need/gaps in provision
- Develop commissioning intentions
- Action planning



Consultations

- Patient survey
- Community pharmacy survey
- Presenting to various stakeholder groups - ongoing
- Public consultation on the Draft PNA – ongoing
- End of consultation period – 26 Nov 2010

Understanding Community Pharmacy Services - 1

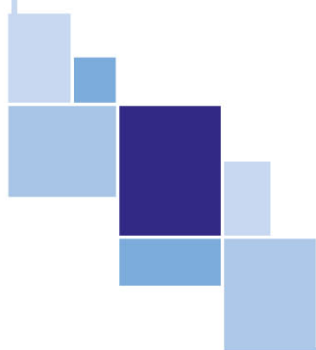
- **Essential Services:**
 - Supply of medicines – prescriptions & counter sale
 - Safe disposal of unwanted medicines
 - Promotion of healthy lifestyles
 - Prescription interventions
 - Public Health Campaigns
 - Signposting to other Health and social services
 - Support for Self-care

Understanding Community Pharmacy Services - 2

- **Advanced Services**
 - Medicine Use Reviews
 - Stoma Customisation
 - Appliance Use Reviews
- **Local Enhanced Services**
 - E.g. Smoking Cessation, Sexual health screening, substance misuse

Mapping current provision

- Providers of pharmaceutical services and premises within PCT area and those outside area.
- Other providers eg NHS Hospitals, Provider arm of PCT, PCT medicines management team.



Gap Analysis

- Determined for a number of categories covering both local and national priorities
 - Public Health Needs (Smoking, Sexual Health, Obesity, self-care and minor ailments)
 - Special Needs Groups (Older People; Patients with Long term conditions, in domiciliary care and End of life care)
 - People in Residential Care
 - PCT priorities (Prevention, Emergency Planning, Emergency Admissions,
 - Access to pharmaceutical services

Key Findings - Access

- 99% of the population can access a pharmacy / dispensing doctor within a 20 min car drive
- 80% within 30 minute walking distance
- Gap in the north of the county, however the area is sparsely populated and within reach of pharmacies in the bordering PCT areas.

Key findings - Services

- A lot of scope to meet health needs with essential services provided by pharmacists – PCT should provide more support in developing these further
- Also scope to improve on existing Local Enhanced Services and commission more of these – recommendations have been made in the PNA

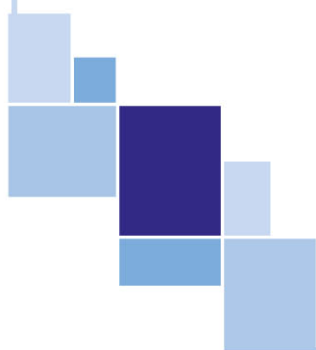
Future Planning

- The PNA is a live document and will be reviewed in light of any significant changes in the needs of the population / provision of services
- The document is being shared widely with commissioners in the PCT to inform commissioning decisions
- Will inform determination of applications for new providers.

Have your say -

By responding to the consultation at:

http://www.bedfordshire.nhs.uk/your_voice/consultations.php



NHS Bedfordshire Estates Projects

18 October 2010



Aims of estates strategy

1. To move activity out of the acute sector into the community, closer to and sometimes in, their own homes.
2. To reduce the reliance on hospital care.
3. To release capacity in the acute sector which will allow us to repatriate activity back in to the county.

Co-location and integration of service delivery

- NHS Bedfordshire is exploring co-location of services with other NHS providers and local authorities.
- NHS Bedfordshire working with Growth Team in masterplanning of Leighton Buzzard, Biggleswade and Dunstable.
- Estates Strategy was shared with CBC and is open for joint ventures.
- NHS Bedfordshire met recently with CBC Interim Head of Assets to discuss opportunities.

Strategic locations (priorities)

- **Biggleswade**
- **Dunstable**
- **Leighton Buzzard**
- **Bedford North /Town Centre**
- **Bedford South (including Station Quarter)**
- West Kempston inc Great Denham and Wootton
- Sandy
- Wixams
- Ampthill
- Flitwick
- Houghton Regis

Current Work

- **Leighton Buzzard**
Service Model drafted and will meet GPs this month to discuss their views and aspirations which will shape the building.
- **Biggleswade**
Service Model being completed in draft. Followed by meeting with GPs to discuss their views and aspirations.
- **Dunstable**
Service Model based on shift of secondary care from Luton and Dunstable Hospital resulting in a joint venture being worked up by end of November.

All 3 Projects headed up by Practice Based Commissioners

Estates Strategy Phase Plan – CBC

Project	Description	Site Location	Consultation	Construction Estimate
Biggleswade	Relocate 2 GP practices and potential additional services	Preference for town centre, working with CBC on 'Big Picture'	Mar – May 2004 To be repeated	Mar 12 – Mar 13
Dunstable	Relocate up to 5 GP practices and potential additional services	Preference for town centre, working with CBC on regeneration	May – Jul 2008 Masterplan consultation with CBC ongoing	Mar 12 – Mar 13
Leighton Buzzard	Relocate up to 5 GP practices and potential additional services	Preference for town centre, working with CBC on regeneration	Autumn 2010 (estimated)	Jul 12 – Jul 13

Refurbishment

- **Sandy Health Centre**
Being refurbished this year to improve the fabric of the building and extend the space with a view to future replacement.
- **Flitwick Health Centre**
Being refurbished this year to improve the fabric of the building.



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