

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



please ask for Paula Everitt
direct line 0300 300 4196
date 29 August 2013

NOTICE OF MEETING

SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE

Date & Time

Monday, 9 September 2013 10.00 a.m.

Venue at

Council Chamber, Priory House, Monks Walk, Shefford

Richard Carr
Chief Executive

To: The Chairman and Members of the SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE:

Cllrs Mrs R J Drinkwater (Chairman), N J Sheppard (Vice-Chairman), R D Berry, Mrs G Clarke, P A Duckett, Mrs R B Gammons, Mrs S A Goodchild, Mrs D B Gurney and M A Smith

[Named Substitutes:

P N Aldis, C C Gomm, Ms A M W Graham, K Janes and Miss A Sparrow]

All other Members of the Council - on request

**MEMBERS OF THE PRESS AND PUBLIC ARE WELCOME TO ATTEND THIS
MEETING**

AGENDA

1. **Apologies for Absence**

Apologies for absence and notification of substitute members

2. **Minutes**

To approve as a correct record the Minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 29 July 2013 and to note actions taken since that meeting.

3. **Members' Interests**

To receive from Members any declarations of interest and of any political whip in relation to any agenda item.

4. **Chairman's Announcements and Communications**

To receive any announcements from the Chairman and any matters of communication.

5. **Petitions**

To receive petitions from members of the public in accordance with the Public Participation Procedure as set out in Annex 2 of Part A4 of the Constitution.

6. **Questions, Statements or Deputations**

To receive any questions, statements or deputations from members of the public in accordance with the Public Participation Procedure as set out in Annex 1 of part A4 of the Constitution.

7. **Call-In**

To consider any decision of the Executive referred to this Committee for review in accordance with Procedure Rule 10.10 of Part D2.

8. **Requested Items**

To consider any items referred to the Committee at the request of a Member under Procedure Rule 3.1 of Part D2 of the Constitution.

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| Reports |
|----------------|

| Item | Subject | Page Nos. |
|-------------|--|------------------|
| 9 | Executive Member Update To receive for information a verbal update from the Executive Member for Social Care Health and Housing. | * |
| 10 | Bedfordshire Clinical Commissioning Group progress report To receive a 6 month progress presentation from the Bedfordshire Clinical Commissioning Group in relation to the delivery of their commissioning intentions for 2013/14. | * verbal |
| 11 | Musculoskeletal (MSK) Service Delivery Model To receive a presentation and comment on the revised service delivery model for MSK services and to review the lessons learnt from this service reorganisation. | * verbal |
| 12 | Framework Agreement for Care Homes in Central Bedfordshire To consider and comment on the Framework Agreement for Care Homes in Central Bedfordshire report prior to consideration by the Executive. | * 13 - 32 |
| 13 | Winterbourne View To receive a progress report on the action plan resulting from the Winterbourne View report. | * 33 - 58 |
| 14 | Healthwatch update To receive a verbal update from the Chairman of Central Bedfordshire Healthwatch. | * verbal |
| 15 | Work Programme 2013 - 2014 & Executive Forward Plan The report provides Members with details of the currently drafted Committee work programme and the latest Executive Forward Plan. | * 59 - 92 |

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CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE** held in Council Chamber, Priory House, Monks Walk, Shefford on Monday, 29 July 2013.

PRESENT

Cllr Mrs R J Drinkwater (Chairman)
Cllr N J Sheppard (Vice-Chairman)

Cllrs R D Berry
Mrs G Clarke
P A Duckett
Mrs R B Gammons

Cllrs Mrs S A Goodchild
Mrs D B Gurney
M A Smith

Members in Attendance: Cllrs P N Aldis
Mrs A Barker
D Bowater
C Hegley
Chairman of Children's Services Overview and Scrutiny Committee
Vice-Chairman of the Council
Executive Member for Social Care, Health & Housing

Officers in Attendance: Mrs P Everitt – Research and Business Support Officer
Mr N Murley – Assistant Director Business & Performance
Mrs J Ogley – Director of Social Care, Health and Housing
Mr J Partridge – Scrutiny Policy Adviser
Mr B Queen – Interim Head of Operations - Housing Service
Ms E Saunders – Assistant Director Commissioning
Mrs S Tyler – Acting Assistant Director, Operational Services, Children's Services

Others in Attendance Mr R Brand East of England Ambulance Service
Mr S Conroy Acting Chief Executive, Bedford Hospital NHS Trust
Ms R Featherstone Chair - Healthwatch Central Bedfordshire
Mr C Hartley East of England Ambulance Service
D Landman Parent Governor Representative
Mrs M Luther Tenant Representative
Mr A Morgan Chief Executive: East of England Ambulance Service
Mr J Rooke Chief Operating Officer Bedfordshire

Ms S Shaw
Mr M Titcomb

Clinical Commissioning Group
Stakeholder Officer
Programme Director, East of England
Ambulance Service

SCHH/13/30 **Minutes**

RESOLVED

That the minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 10 June 2013 be confirmed and signed by the Chairman as a correct record.

SCHH/13/31 **Members' Interests**

- Cllr Mrs Clarke declared an interest as a family member worked for the Clinical Commissioning Group.
- Cllr Mrs Goodchild declared an interest as a member of her family was a service user.

SCHH/13/32 **Chairman's Announcements and Communications**

The Chairman had recently attended a Centre for Public Scrutiny regional workshop to support the development of relationships between health scrutiny, NHS England and Public Health England. A regional workshop of Health Scrutiny Chairs would be arranged to further develop this initiative.

Members of the Committee were invited to visit Biggleswade Hospital and the Greenacre 'step up, step down' facility. A Member requested the short stay medical unit facility in Houghton Regis also be included in the tour.

SCHH/13/33 **Petitions**

No petitions were received from members of the public in accordance with the Public Participation Procedure as set out in Part D2 of the Constitution.

SCHH/13/34 **Questions, Statements or Deputations**

No questions, statements or deputations were received from members of the public in accordance with the Public Participation Procedure as set out in Annex 1 of Part A4 of the Constitution.

SCHH/13/35 **Call-In**

The Committee were advised that no decisions of the Executive had been referred to them under the Call-in Procedures set out in Appendix A to Rule No. S18 of the Overview and Scrutiny Procedure Rules.

SCHH/13/36 **Requested Items**

No items were referred to the Committee for consideration at the request of a Member under Procedure Rule 3.1 of Part D2 of the Constitution.

SCHH/13/37 Executive Member Update

The Executive Member for Social Care, Health and Housing updated the Committee on the closure of the Meppershall Care Home.

Tribute was paid to everyone involved in the re-homing of 68 residents from Meppershall Care Home. Care Quality Commission had raised several concerns leading to the closure of the home which included the failure of management to implement an improvement plan and concerns for patient safety. The Committee were informed the and professionalism of CBC staff, SEPT and BCCG had ensured a successful transition for all concerned.

Members of the Committee wished to add their thanks and appreciation to those of the Executive Member and Director of Social Care, Health and Housing and requested that a letter be sent to council staff to say thank you.

Members sought clarification on the roles and responsibility of the Council in relation to care homes. The Director of Social Care Health and Housing explained that officers carried out contract compliance reviews of homes but the Council was not a regulator and therefore did not have the power to close a home. Officer reports were passed to the Care Quality Commission to follow up. The Council adhered to a framework for residential care to drive up standards, and ensure better care. Officers would review the lessons learnt from closure of the Meppershall Care Home and would bring a report back to the Committee. It was also suggested that a training session be provided to Members relating to the powers of the local authority in relation to inspections.

SCHH/13/38 East of England Ambulance Trust Turnaround Plan

Andrew Morgan, Chief Executive of the East of England Ambulance Service NHS Trust (EoEAS) introduced the turnaround plan to Members that set out how to deliver better services for patients.

The Trust had developed a single action plan that incorporated actions from the turnaround plan and recommendations from a governance review. The single action plan recognised the need to improve services to patients and build better staff engagement and empowerment. The proactive measures included:

- The recruitment of more staff;
- The reduction of sickness absence;
- Performance management and quarterly reviews to discuss outturn and local accountability;
- Improving internal and external engagement;

In response to the report and the further clarification provided the East of England Ambulance Trust representatives, the Committee discussed the following:-

- The challenge of managing expectations was a major concern for the Trust. The Trust saw itself as a care provider, with more paramedics on board it would provide both 'hear and treat' and 'see and treat' services with the best clinicians and nurse practitioners in the control rooms.

- Whether the closure of the paediatric ward at Bedford Hospital had caused additional strain on the Ambulance service. The Chief Executive of EoEAS commented that due to the close proximity of alternative hospitals, this had not caused them any difficulties to date.
- Whether the size of the East of England region hindered the ability of the Trust to deliver its services in such a big area. The Chief Executive of EoEAT responded that the regions had merged to cut duplication and bureaucracy and there was no appetite to revert back.
- Further detail regard the percentage of cardiac patients who survive to discharge was necessary
- The challenge that develop for performance of the Trust if there were problems in handover of patients to A&E.

Members acknowledged the plan was a transparent and honest assessment of the Trust's position and its commitment to significant change. The performance of the Trust in the Central Bedfordshire area remained good, however, difficulties still existed in other areas. Members wished to be updated on the measures to improve the service and it was agreed that a report be brought back to Members in 2014.

The Chairman thanked the representatives for their attendance and helpful contribution to the debate at the meeting.

Noted the East of England Ambulance Service NHS Trust's turnaround plan and that an updated be provided to the Committee in January 2014.

SCHH/13/39 **Interim changes to Paediatric Services at Bedford Hospital**

The Chairman welcomed Stephen Conroy, Chief Executive of the Bedford Hospital Trust, who provided a verbal update to the Committee on the closure of the paediatric ward at Bedford Hospital.

Members were informed of the decision by the Dean of Health Education England to withdraw seven junior doctors from the paediatric ward over concerns of inadequate levels of supervision by consultants. Emergency admissions and overnight stays had ceased and interim arrangements had been put in place to ensure patients received the best care at other hospitals.

At the beginning of September, two reviews were to be undertaken by an independent reviewer. The first review would investigate why this issue has occurred and the second would consider the robust training requirements the hospital needed to put in place to ensure Bedford Hospital provided a full paediatric service. The Bedford Hospital Board would agree the terms of reference for each review, which were expected that the reviews would take up to two months to complete.

In light of the update Members discussed the following:-

- Whether Consultants based at the hospital or the current management were at fault for the issues. The Chief Executive, Bedford Hospital Trust commented that the reviews would consider who was at fault for the issues.

- The potential for hospital mergers and whether the closure of the paediatric ward would lead to services being delivered in Milton Keynes in the future.
- Issues relating to staff retention the Chief Executive, Bedford Hospital Trust explained that Bedford Hospital had a small paediatric ward and to get the best doctors working at the Hospital, it would be necessary to change the way the service was provided and look to work in partnership with another acute provider. It was commented that all current staff had been asked to stay and that Bedford Hospital would take the opportunity to train staff and the day services would continue to be provided on the ward.
- John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning Group, commented that although the Deanery had removed the seven junior doctors, the posts had been retained. Every effort would be made to satisfy the Deanery that the training of junior doctors and services should be reinstated. The Overview and Scrutiny Committee and Health and Wellbeing Board on would be consulted on the proposals to change services.
- The consequential change to the interim arrangements on other hospitals.

Noted the update and requested that the Chief Operations Officers at Bedfordshire Clinical Commissioning Group consult the Committee on the proposed paediatric services change at Bedford Hospital be considered at a future meeting.

SCHH/13/40 Implications of The Francis report

John Rooke, Chief Operating Officer, Bedfordshire Clinical Commissioning (BCCG) gave a presentation explaining the new structure for health, the challenges facing the NHS and the opportunities for change. Locally, strong relationships and leadership had been developed in addition to good quality primary care. This had provided a great starting point to deliver good quality services to residents.

The Chief Operating Officer, BCCG, also provided an update on the outcome of the Francis Report included 290 recommendation for change and five key themes. In response to the Report, the BCCG had developed an action plan called 'A culture of care; our plans to implement the recommendations of the Francis Report'.

In response to the presentation and the approach being taken to implement the Francis Report recommendations by the BCCG, Members discussed the following points:-

- Concerns that the CCG would not respond to or learn from concerns. John Rooke responded that BCCG would introduce a complaints system to ensure complaints were listened to and lessons learnt. Learning would be circulated around the organisation to ensure similar incidents were not repeated. Members would be given the opportunity to assess the BCCG's strategic risk register if they felt it necessary.
- Following this discussion the Committee invited the Chairman of Healthwatch to present a report on the work of the organisation and to highlight the issues of current concern in Central Bedfordshire.

- The importance of the overview and scrutiny arrangements that challenge partners and enhance the patient voice.

Noted the update and requested the Bedfordshire CCG performance against the action plan be reported to a future meeting.

SCHH/13/41 **Biggleswade Hospital**

John Rooke, Chief Operations Officer at Bedfordshire Clinical Commissioning Group (BCCG) introduced a report that outlined the recommendations with implications for Biggleswade Hospital Community Bed Review including:

- The criteria for admission to Biggleswade Hospital be amended to reflect the need to cater for people recovering from ill health, including those that are non-weight bearing.
- The new service should mirror that provided at both Houghton Regis Short Stay Medical Unit and the Step up, Step down reablement service at Greenacre.
- The two units hosting 29 beds are remodelled to provide the necessary accommodation to support rehabilitation and reablement.

In response to the report, further clarification was provided by the Chief Operations Officer (BCCG) and Members of the Committee discussed the following:

- Concern as to why the maximum number of beds had not been filled at Biggleswade Hospital. The Chief Operations Officer, BCCG, explained the reasons were being looked into with partner organisations. However, by remodelling the unit it was envisaged that usage would be increased with GP's referring their patients to the facility.
- The legal position regard the Biggleswade Hospital premises and whether the asset had been held in trust. The Chief Operations Officer, BCCG, would investigate the position and report back to Members.
- The outcome of discussions with SEPT regarding the implementation of the model and recommendations to be reflected in the 2013/14 contract be reported to the Committee

Noted the update and requested that comments of the Committee be considered by the Chief Operations Officer, Bedfordshire Clinical Commissioning Group, when agreeing contractual arrangements with SEPT for Biggleswade Hospital.

SCHH/13/42 **Review of Sheltered Housing**

The Interim Head of Housing Operations introduced a report on the Sheltered Housing Review. The report proposed changes to the way that Council owned sheltered housing schemes were used and that an agreed standard be used to assess the investment needs of existing housing. The report proposed a further review regarding the investment needs and options appraisals for a small number of sheltered housing schemes that had potential for substantial improvement. The sites included:-

- Baker Street, Leighton Buzzard
- Bedford Street, Leighton Buzzard

- Croft Green, Dunstable
- Tudor Court, Leighton Buzzard and
- Finch Crescent, Leighton Buzzard

Margaret Luther, representing the Sheltered Tenants' Action Group (STAG) welcomed the review and the introduction of an agreed standard, but raised concerns that people of 55+ were eligible to live in sheltered schemes

The Committee welcomed the proposed sheltered housing standard and the proposal to re-designate some schemes where the stock consisted of two and three floor properties without lift access to 55+ residents.

RECOMMENDED

- 1. That the introduction of a sheltered housing scheme standard be supported**
- 2. That further investigation be undertaken into the proposal to segment some schemes to be re-designated to 55+ Housing**
- 3. That the Committee support the major review of the five sites as discussed in the minutes and that other schemes be reviewed to raise the quality and amenity on an individual basis to the proposed Sheltered Housing Standard.**

SCHH/13/43 Quarter 4 Performance Monitoring Report

The Committee received the Quarter Four Performance Monitoring Report which highlighted the performance for the Social Care Health and Housing Directorate for Quarter 4 of 2012/13.

Noted the report.

SCHH/13/44 General Fund Revenue Budget Monitoring Outturn 2012/13

The Committee received the General Fund Revenue Budget Management Report for 2012/13 for Social Care, Health and Housing, which set out the financial position at the end of 2012/13.

Noted the report.

SCHH/13/45 Capital Budget Management 2012/13

The Committee received the Capital Budget Management 2012/13 report that provided information on the Directorate General Fund Capital Outturn position for 2012/13.

Noted the report.

SCHH/13/46 2012/13 Housing Revenue Account Outturn Report

The Committee received the 2012/13 Housing Revenue Account Outturn Report, which provided information on the 2012/13 outturn revenue and capital position.

Noted the report.

SCHH/13/47 **Work Programme 2013-2014 & Executive Forward Plan**

The Committee considered its current work programme and the latest Executive Forward Plan.

RESOLVED

That the work programme be endorsed subject to the amendments detailed in the body of the minutes.

(Note: The meeting commenced at 10.00 am and concluded at 13.40 pm)

Meeting: Social Care, Health and Housing Overview and Scrutiny Committee
Date: 09 September 2013
Subject: Framework Agreement for Care Homes in Central Bedfordshire
Report of: Cllr Ms Hegley, Executive Member for Social Care Health and Housing
Summary: The Executive on 6 November 2012 approved a report that established a strategic approach to commissioning services for older people within care homes in Central Bedfordshire. Specifically this included:

- a) An accreditation scheme for dementia care so that a minimum of 60% of dementia care will be rated as 'good' or 'excellent';
- b) A quality monitoring system which assesses the quality of each care home and allocates it to a quality performance band; and
- c) A framework agreement for commissioning places in care homes that links the quality of care to an agreed and fixed contract price.

The dementia accreditation scheme is now in place and this report provides an overview of the approach to be undertaken to implement the framework agreement and quality monitoring system.

Advising Officer: Julie Ogley, Director of Adult Social Care Health and Housing
Contact Officer: Elizabeth Saunders, Assistant Director Strategic Commissioning
Public/Exempt: Public
Wards Affected: All
Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

1.
 - Promote health and wellbeing and protecting the vulnerable.
 - Value for money – freezing council tax.
2. The framework agreement deals with the purchasing of accommodation services within care homes for vulnerable older people over 65 years of age.
3. The contract will apply at any one time to 350 of the most vulnerable older people within Central Bedfordshire and approximately 1,000 people will receive the service over the four years of the framework agreement.
4. This number will increase over time as we move away from the BUPA block contract and transfer the services provided to care homes that are on the framework agreement.

Financial:

5. The financial implications of implementing the framework agreement have been extensively assessed by comparing the current costs of the service with the costs of a number of options.
6. The main conclusion of this analysis is that the financial impact of implementing the framework agreement is relatively minor in relation to the budget of £8.7m. Depending on the effect that the framework agreement has on the behaviour of both customers in choosing to move into higher quality care homes and providers in increasing their quality performance rating there is likely to be either a small saving to or a small increase in the budget.

Legal:

7. The Conditions of Contract and other documentation under which this framework agreement will be let are based on the Regional Standard Terms and Conditions of Contract for Adult Social Care and Housing Related Support Services in the East of England (version 3.2 produced in October 2012).
8. The Regional Standard is a common set of processes and documents that has been approved by the Association of Directors of Adult Social Services (ADASS) – Eastern Branch and adapted by the Council for this contract.
9. These Conditions of Contract and supporting documents are acceptable to the Council, include the clauses that it would wish to see within such a contract and do not include anything that would be prejudicial to its interests.

Risk Management:

10. There is a full Risk Register to identify, assess and mitigate risks to the successful delivery of the quality monitoring system and the framework agreement. All risks have been identified and treated as necessary to reduce their impact.
11. These include any financial and legal implications of introducing the framework agreement and potential disruptions to the care home market resulting from these new arrangements. They will continue to be monitored throughout the implementation and operation of the framework agreement.

Staffing (including Trades Unions):

12. Not Applicable.

Equalities/Human Rights:

13. The Council has a statutory duty to promote equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics.

These are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
14. The framework agreement will provide accommodation within care homes for all customers from a number of the groups with protected characteristics under the public sector equality duty. It is primarily directed at people over the age of 65 who have a range of conditions including dementia, physical and sensory disabilities, learning disabilities, mental health needs, physical frailty, vulnerability and temporary illness.

15. This approach will advance equality of opportunity and have a positive impact on some of the most vulnerable people in Central Bedfordshire. It is focussed on improving the quality of care that the Council purchases within care homes so that they not only carry out the personal care tasks required such as washing, dressing and feeding but also deliver outcome-focussed care that maximises people's independence, health and well being and supports their social, spiritual, emotional and healthcare needs.
16. The Framework Agreements also includes requirements relating to staff recruitment, staffing and staff deployment and supporting staff in the working environment.
17. The Equality Impact Assessment (which is available as a background document on request) has considered the impact of this policy and sets out how the introduction of the framework agreement addresses the Council's public sector equality duty. It concludes that the procurement of these services includes a thorough consideration of equality and diversity which will ensure the provision of high quality accommodation to a number of groups with protected characteristics.

Public Health

18. The framework agreement will commission accommodation services in care homes to some of the most vulnerable people within our community who, because of their frailty or ill-health, are unable to remain living safely within their own homes.
19. It will be focussed on maximising each customer's independence and take a preventive approach to maximise their health and well-being and achieving the outcomes set out in their care and support plans.

Community Safety:

20. Not Applicable.

Sustainability:

21. Not Applicable.

Procurement:

22. The procurement approach set down in this report is the most effective method of procuring these services providing value for money contracts.
23. The corporate procurement team has been involved throughout the process of developing this policy to ensure that the steps followed are rigorous, legal, in accordance with the Council's procurement policies and procedures and designed to attract sufficient qualified and experienced providers that are able to supply the services.
24. This has included the production of the contract documentation and the invitation to tender as well as the design of the procurement process, including the evaluation criteria. This tender has been advertised both electronically and in selected local newspapers to ensure that this process is fair, transparent and open to all skilled and experienced providers in this area.
25. The procurement team is now managing the procurement and evaluation stage of the project and will continue in this role until the contract is let.

RECOMMENDATIONS:

The Committee is asked to consider and comment on the proposed approach to procuring these accommodation services:-

- 1. To establish a framework agreement as recommended in paragraphs 36 and 37 (The Options) the specific elements of which are contained in Appendices A (The Framework Agreement) and B (The Tender Process);**
- 2. To implement the quality monitoring system set out at Appendix D (Quality Monitoring System) at the same time as the framework agreement; and**
- 3. To implement the framework agreement on the basis described at method 2 paragraph 42(b) from the 3 options in paragraph 42.**

National Rating System

26. The Nuffield Review which reported in February 2013 recommended that a national rating system for care homes with and without nursing is set up and managed by the Care Quality Commission (CQC). This was endorsed in general terms by the government in March 2013 and has since been included within the Care Bill 2013. To implement this, the CQC would have to design the ratings system and establish the information collection processes needed to operate it. This would have to be approved by the government and probably piloted in a few areas before being introduced across the board
27. Whilst the Council needs to be aware of the details of a national rating system and how it is to be implemented it is unlikely to be in place before April 2015. A robust quality monitoring system has been developed by the ADASS Eastern Region group and has been piloted within Central Bedfordshire over the last 12 months, the details of which are included at Appendix D. The roll out of this quality monitoring system will be continued as planned alongside the framework agreement.
28. On the commencement date of the framework agreement in November 2013 each care home of those providers accepted onto the framework agreement plus the 8 BUPA managed care homes will be allocated to one of four quality performance bands. This will enable the Council to link the quality of services within these care homes to an agreed contract price that it will pay for each publicly funded customer.
29. When a national system is in place at a later date the current processes will be reviewed and merged with the new system as necessary.

Consultation and Communication

30. The Council has undertaken a comprehensive engagement programme with providers consisting of a series of workshops from 2011, a questionnaire and a separate focus group with invited providers. The intention behind this was to understand and collate evidence in relation to the current and future costs faced by providers and to identify additional areas of concern for Central Bedfordshire residents in relation to the provision of accommodation within care homes.
31. As a result of this consultation a number of recommendations were made to the Social Care, Health and Housing Directorate Management Team in June 2012 including the establishment of a dementia quality accreditation scheme to help drive up the standards of dementia care in qualifying care homes.

32. A further meeting was held with providers in November 2012 setting out the broad principles of the intentions of the Council to introduce a framework agreement. Additional clarification on the procurement process and the transition arrangements was provided at a later briefing meeting on 28th May 2013. New providers were also invited and advised that if they were interested in building in the area they should go through the procurement process as the framework agreement will be closed for its 3 year contract period.
33. There is a Communication and Engagement Plan to ensure that all stakeholders are able to engage in a meaningful way throughout the project duration. A letter to customers has been developed to inform them of the quality monitoring system and the framework agreement and to reassure them that they will continue to receive the care of their choice whilst these new arrangements are put in place.

Risk Analysis

34. There is a full Risk Register to identify, assess and mitigate any risks to the successful delivery of the quality monitoring system and the framework agreement. The key high risks for this project are:
 - (a) Customers and their relatives may be concerned if they find out that the accommodation services within care homes are being retendered. This is being addressed through communication and engagement with customers, families, providers and staff to inform them of the changes and provide reassurance that customers will not be required to move if their existing provider is not included in the framework agreement;
 - (b) There may be insufficient applicants for the framework agreement. This is being addressed through positive engagement with providers and ensuring that the framework agreement provides material advantage, particularly financial benefit, to the provider. The Invitation To Tender will be widely marketed and the procurement process will be as simple as possible to ensure it is not too time consuming or complicated for providers to complete; and
 - (c) The framework agreement will drive up quality which will raise costs which could make it unaffordable within the current budget. This risk has been mitigated through a thorough financial analysis of the options (see paragraphs 46 to 50 below for details).

Options

35. A number of different contractual options were considered before the preferred option was recommended. These were:

Option 1: Tender for a Framework Agreement

36. This is the preferred option approved by the Executive and outlined in the current report. It will deliver the following benefits for the Council, its customers and the providers:
 - (a) Delivering high quality services to all customers through a quality monitoring system and contract pricing policy that rewards high quality and consistent performance;
 - (b) Allowing existing customers to remain with their current providers, minimising disruption to customers and their families whilst providing transparent and market competitive rates which achieve value for money;

- (c) Providing more choice of personalised care and access to information to those self directing support;
 - (d) Enabling the shaping and development of a robust market to achieve stability and resilience of supply across Central Bedfordshire and greater capacity within the market;
 - (e) Identifying the best care home for each customer's requirements with the ability to award a contract without re-opening competition; and
 - (f) Establishing a framework for greater collaborative relationships with providers which enhance opportunities for innovation and business development.
37. The following disadvantages have been identified, all of which are being mitigated through the risk management strategy:
- (a) There may be insufficient applicants for the framework agreement;
 - (b) New providers that enter the market within 3 years of the commencement of the framework agreement will be unable to get onto the framework agreement as it will be closed for the duration of the contract period;
 - (c) The Council needs to ensure that there are sufficient finances available as the framework agreement will drive up quality which will raise costs (see paragraphs 46 to 50 below for details); and
 - (d) Existing providers may not get onto the framework agreement and may not be willing to retain Council customers at the current rates. This could result in either the Council paying an inflated price for these customers or them having to move into a care home that is on the framework agreement.

Option 2: Retain the Current System of Block and Spot Contracts

38. The Council has a block contract in place with BUPA which pays for a set number of beds whether or not they are occupied. Alongside this there are a number of spot contracts with providers who provide services as and when required.
39. The disadvantages of the current system are:
- (a) There is no link between the quality of the services and the contract price to give an incentive for providers to improve quality and deliver value for money;
 - (b) The current supply of accommodation is not sustainable to meet the longer term demand in Central Bedfordshire;
 - (c) A lack of transparency in the contractual arrangements as the providers have not gone through a tendering process or been assessed against standard requirements such as data protection, insurance and financial viability; and
 - (d) Customers are not able easily to choose from the widest range of care homes to meet their requirements based on their quality and location.

Option 3: Establish a Preferred List of Providers

40. A preferred list of providers is operated in the same way as a series of spot contracts except that these providers will have gone through a selection process to be accepted onto the preferred provider list.
41. The disadvantages of a preferred list of providers are:-

- (a) The arrangement does not encourage the providers to be as competitive as the Council would like, which may have a detrimental impact on quality and price;
- (b) The providers would be less stringently assessed in terms of the quality of their services and their financial stability; and
- (c) Pricing and any other terms can be changed at any time as the conditions of each contract is negotiated and agreed when each specific service is established and not at the beginning of a contract period.

Implementing The Framework Agreement

42. There are a number of ways in which the framework agreement can be implemented. The three methods that have been considered in detail are:
- (a) New fees are implemented for all customers from the beginning of the agreement irrespective of their current fee levels.

This method is most advantageous to the Council and relatively onerous on the providers as it reduces the fees paid for existing customers that are higher than what the Council would usually pay to the contract price for the care home's performance rating;
 - (b) New fees are implemented for all customers who are currently funded on existing Council rates or lower so that those on lower fees than their quality performance band go up and those on higher fees go down. Customers on higher non standard fees are protected and remain as they are.

This is fairer to providers in that it implements new fees for all customers at the beginning of the framework agreement. It also protects providers from having to bear price reductions by honouring those fees that are higher than the standard Council fees; and
 - (c) New fees are implemented only for new customers. Existing customers stay on their current rates.

This would result in a series of differential payments for customers with the same needs within the same care home. It would also discriminate against those care homes that have improved their quality rating as the additional payments that they will receive as a result of this will only be paid for new customers and not their existing customers.
43. The preferred methodology for implementing the framework agreement is method 2 described at paragraph 42(b) above.
44. It is fairer to the providers as they will have sufficient time to adjust their business operations to accommodate or mitigate any long term reductions in income that might occur as a result of implementing the framework agreement.
45. This methodology also enables us to implement the new quality performance bands as soon as possible, paying providers from the beginning of the framework agreement on the basis of their current quality performance rating rather than implementing it over a longer period.

Financial implications

46. The financial implications of implementing the framework agreement have been extensively assessed by comparing the current costs of the service with the costs of a number of options. These are based on five sets of assumptions about the ability of providers to improve the quality of their care homes and thus attract

higher contract prices which will increase the overall costs to the Council. The outcome of this process will vary depending on how many customers move into care homes with higher quality performance bands as a result of implementing the framework agreement.

47. At the lower end of the financial spectrum there are two options in which up to 5 of the 25 care homes increase their quality rating by moving up a performance band from their current position. This increases the number of customers living in care homes that are either 'excellent' or 'good' from 60% to 65% as well as achieving a cost saving to the Council.
48. The middle option in which 12 of the 25 care homes move up a performance band will result in a minor saving to the Council. This is a relatively easily achievable outcome with customers and provider behaviour changing so that the number of customers living in care homes that are either 'excellent' or 'good' increases from 60% to 75%.
49. Further up the scale option 4 has all 25 care homes moving up a performance band. This will result in all customers being in an 'excellent' or 'good' home at a small increase to the budget. This is possible but unlikely to happen in the foreseeable future. Finally option 5 has all 25 care homes improving their performance rating to 'excellent'. This is the maximum possible exposure to implementing the framework agreement and would cost an additional £150,000, however it is very unlikely to happen.
50. The main conclusion of this analysis is that the most likely outcome would lie somewhere between options 3 and 4 in which around 80% of customers would be in either 'excellent' or 'good' homes. Depending on the effect that the framework agreement has on the behaviour of both customers in choosing to move into higher quality care homes and providers in increasing their quality performance rating there is likely to be either a small saving to or a small increase in the budget. Given this the financial implications of implementing the framework agreement are relatively minor in relation to the budget of £8.7m.

Appendices:

Appendix A – The Framework Agreement

Appendix B – The Tender Process

Appendix C – The Operation of the Framework Agreement

Appendix D – The Quality Monitoring System

Background papers and their location:

1. Report to the Executive on 06 November 2012: "Commissioning for Outcomes: Approach to Standards and Quality of Dementia Care, Fee Levels for Care Homes and Planned Withdrawal from Existing Block Contract Arrangements."
2. "Care Home Provision Central Bedfordshire – Strategic Business Case": Equality Impact Assessment, 16th November 2012.

APPENDIX A

THE FRAMEWORK AGREEMENT

The Framework Agreement

The framework agreement is an umbrella agreement between the Council and a number of care home providers that enables individual contracts for specific customers (generally referred to as 'call-offs') to be awarded throughout the period of the framework agreement. It is often used, as in this case, when the total value of the contract is not known as the number of places that the Council needs to purchase will vary from month to month depending on the number of people assessed as needing accommodation in care homes.

This allows the Council the maximum flexibility to vary the number of places it purchases at any time in each care home depending on demand, the individual circumstances of each provider, their location and where people want to go. In this respect it is similar to operating a series of individual contracts through spot purchases but with more robust contractual arrangements in place in terms of the conditions of the framework agreement and the contract price which are established when the framework agreement is let rather than for every individual service that is provided.

Scope of the Agreement

The framework agreement will cover the following providers:

- 1) All care homes for older people with and without nursing in Central Bedfordshire that are registered with the CQC to provide care for people aged 65 years and over, except the 8 care homes that are currently managed by BUPA; and
- 2) Care homes with and without nursing to be opened by new providers who want to move into the area.

The framework agreement will include the following customers:

- 1) Publicly funded customers who are 65+ years old who have dementia or are physically frail or have a physical impairment or ill-health that is primarily age-related;
- 2) Publicly funded customers who have a learning disability, physical impairment or mental health need who are living within care homes in central Bedfordshire registered to provide care to people aged 65 years and over; and
- 3) People in need of palliative and end of life care.

The Council will also purchase short-term care from within this framework agreement. This can be for a number of reasons such as to provide respite care that will enable a customer's carer to take a break from their caring responsibilities, in an emergency when a person's care arrangements have temporarily broken down or where a customer is unable to return home for a short period following hospital treatment or whilst adaptations are being made to their property. In all of these circumstances it is anticipated that the

customer will return home to independent living and the provider will be expected to ensure that the period within the care home will be used to maintain or regain the skills needed to enable the customer to return home with no loss of independence.

The Impact on Existing Customers

Existing customers will not be affected by the introduction of the framework agreement. They will be able to stay within their existing care home unless they specifically choose to move elsewhere.

Additional Services

In addition to the standard services provided within the framework agreement there is the potential to provide a number of additional services depending upon the specified need for these which is currently being assessed:

- 1) **Rehabilitation & Re-ablement.** There are current discussions with the Bedfordshire Clinical Commissioning Group to consider how best to provide rehabilitation and re-ablement services, some of which could be provided to people living in care homes with and without nursing. This will be referred to within the tender documents and when the Council is ready providers on the framework agreement will be approached to discuss how best to set up these services.
- 2) **Respite Care Services.** Opportunities are being explored around the need to commission respite care services that are currently part of the contract with BUPA or which cannot be provided within the BUPA managed care homes. This will be referred to in the tender documents and when the Council is ready to proceed providers on the framework agreement will be approached to discuss how best to set up these services.

Continuing Healthcare Services (CHC).

There are also current discussions with the Bedfordshire Clinical Commissioning Group to include the purchasing of CHC beds for older people within the framework agreement. Issues include which service specification should be used and the contract price to be charged. The purchase of CHC beds will be referred to in the tender documents and when the Council and the CCG are ready the providers on the framework agreement will be approached to discuss the future arrangements for commissioning CHC services.

This could also allow the Council to purchase CHC places for older people on behalf of the NHS. This will take longer to organise with issues around organisational arrangements, budgets and contractual agreements needing to be resolved.

Contract Period

The maximum allowable length of a framework agreement under European Union law is four years. It is proposed that we enter into a 3 year contract with an option to extend it by one year to the 4 year maximum. This is to provide the Council with the maximum flexibility in the event that a new provider with whom we may want to do business enters the care home market during the lifetime of the framework agreement.

Given that it takes at least 3 years from the initiation of a capital project through the planning process to completion it is extremely unlikely that any development project that we are not aware of at the beginning of the agreement will be developed within the initial 3 year period.

The Council will also ensure that at the end of the framework agreement all customers continue to receive care from their existing provider whilst new contractual arrangements are put into place.

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APPENDIX B

THE TENDER PROCESS

Timescales for the Tender Process

The proposed timetable for the tender process is:

| | |
|--|--|
| Advert published and ITT available on In-Tend | Friday 26 th . July 2013 |
| Questions and answers and clarification period | Monday 29 th . July to Friday 23 rd August 2013 (4 weeks) |
| ITT response deadline date (fixed) | Monday 2 nd September 2013 |
| ITT evaluation | Monday 2 nd September to Friday 20 th . September 2013 (3 weeks) |
| Overview & Scrutiny Committee | Monday 9 th . September 2013 |
| Final decision on providers accepted onto the framework agreement | By Friday 20 th . September 2013 |
| Executive meeting | Tuesday 24 th . September 2013 |
| Providers Informed of decision and their quality banding | By Friday 27 th . September 2013 |
| Contracts signed and briefing meeting(s) for successful providers take place | October 2013 |
| Operational processes are implemented | Wednesday 25 th September to Wednesday 30 th October (5 weeks) |
| Framework agreement in place | Monday 4 th . November 2013 |

Tender Evaluation

The tender will bring providers onto the framework agreement by assessing whether they are a 'fit and proper' organisation from whom we wish to purchase accommodation.

The evaluation will be based on the completion of:

- a) A Provider Questionnaire (50% of evaluation) which covers financial stability and organisational procedures (e.g. data handling; equalities; health & safety; insurances; business continuity and safeguarding); and
- b) References from two existing commissioning authorities (50% of evaluation) covering (quality of care; caring for people with dementia; maximising independence; handling

complaints; staff development; management competency; value for money; maintaining records & partnership working).

The tender is evaluating each provider to determine whether or not they are to be accepted onto the framework agreement. Thus a provider with more than one care home with or without nursing in the area will only apply and be evaluated once, not for each care home.

The tender evaluation team will comprise the Assistant Director Strategic Commissioning, Commissioning and Contracts Officers within the Social Care, Health and Housing Department and a Procurement Officer. It will also involve the Executive Member/Deputy Executive Member for Social Care, Health and Housing and the Chair of the Older People's Reference Group.

APPENDIX C

THE OPERATION OF THE FRAMEWORK AGREEMENT

The Allocation of Contract Prices

New Customers within the framework agreement will be paid for at the new contract prices from the commencement date of the framework agreement, except that:

- (1) Where the quality performance rating of a care home with and without nursing goes down there will be a 6 month transition period in which it will retain its current price to allow time for it to improve its quality performance rating; and
- (2) When a new care home with or without nursing opens any placement to it will be paid at a price equivalent to that of an 'adequate' care home until it can be allocated to a quality performance band and a contract price established, at which time any difference will be backdated.

New Customers in care homes that are outside of the framework agreement and within Central Bedfordshire will be paid for at a price equivalent to that of an 'adequate' care home. If this is less than the fee charged by the care home there will have to be a third party contribution to enable the customer to move there.

New Customers in care homes that are outside Central Bedfordshire will be paid for at the host local authority's usual rate. If this is less than the fee charged by the care home there will have to be a third party contribution to enable the customer to move there.

Self Funders with diminishing resources who become eligible for public funding:

- 1) If living within a care home that is within the framework agreement, will be paid for at the agreed contract price irrespective of the fee they were originally paying;
- 2) If living within a care home that is outside the framework agreement and following a care and risk assessment that deems them to be able to move to alternative accommodation:
 - a. will be offered a choice of any of the 8 Council or BUPA owned care homes within their preferred location at the agreed contract price; then
 - b. if these do not meet their needs they will be offered a choice of the care homes on the framework agreement within their preferred location at the agreed contract price.

If they choose to stay in their current care home and the fees are higher than those for an 'adequate' care home or what the host authority would normally pay if outside of Central Bedfordshire there will need to be a third party contribution for them to stay there; or

- 3) If living within a care home that is outside the framework agreement and following a care and risk assessment that deems them unsuitable to move to alternative accommodation, will be publicly funded within that care home without there having to be a third party contribution.

The Placement of New Customers within Care Homes

All new customers will be offered places within the care homes of providers that have been accepted onto the framework agreement plus the 8 care homes managed by BUPA. However given that for the foreseeable future the current block contract with BUPA will continue, albeit reducing over a 7 year period, priority will be given to the BUPA managed care homes.

The process for allocating publicly funded customers to places within care homes within Central Bedfordshire will be:

- 1) Customers will initially be offered a choice of any of the 8 Council or BUPA owned care homes within their preferred location; then
- 2) If these do not meet their needs they will be offered a choice of the care homes of the providers on the framework agreement that are within their preferred location.

The Council will not generally offer customers a place within a care home that:

- 1) Is not one of the 8 BUPA managed homes or is owned by any provider that is not on the framework agreement; or
- 2) Has been assessed through the Quality Monitoring System as having a quality performance rating of 'poor'.

However the Council reserves the right in exceptional circumstances to offer places outside of the framework agreement. This will only be used once all options within the framework agreement have been exhausted.

Customers will be given information about each care home, including its quality performance rating, to enable them to find a care home that meets their requirements into which they are happy to move.

If a customer want to go to a care home with or without nursing that is outside of the 8 BUPA managed homes or the framework agreement the Council will facilitate this to provide choice to customers providing that if the care home is:

- 1) Within Central Bedfordshire the rate that the Council will pay will be equivalent to that of an 'adequate' care home with or without nursing. If this is less than the fee charged by the care home there will have to be a third party contribution to allow the customer to move there; or

- 2) Outside of Central Bedfordshire the rate that the Council will pay will be the same as that usually paid by the host authority. If this is less than the fee charged by the care home there will have to be a third party contribution to allow the customer to move there.

The allocations process will be reviewed in the future so that priority is not given to any one provider, thereby increasing choice and enabling customers' decisions to be based on the quality of the care homes. The timing of this will be dependent on the negotiations with BUPA about the future block contract and the programme for closing the 7 Council owned care homes.

Third Party Contributions

Third party contributions were introduced by the government to increase choice to people moving into care homes with and without nursing. They are only available in certain specific circumstances, the details of which are governed by DH statutory guidance and contained in Local Authority Circular [LAC (2004) 20]. This says that a third party contribution:

“applies only when a resident explicitly chooses to enter accommodation other than that which the council offers them and where that preferred accommodation is more expensive than the council would usually expect to pay.”

A customer may thus explicitly choose, if available, a placement within a care home other than that offered by the Council under this contract and which is more expensive than the contract price that the Council would normally pay for a person with their assessed needs.

In such a case the difference between:

- (a) the Contract Price that the Council would normally pay to meet the customer's assessed needs ; and
- (b) the actual price charged by the care home;

must be met by a third party contribution in order for the customer to move there.

These are the only circumstances in which a third party may be asked by the Council to make a contribution to the cost of a customer's care home fees. All other potential circumstances for third party contributions will be addressed on a case by case basis in accordance with the statutory guidance.

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APPENDIX D

THE QUALITY MONITORING SYSTEM

The care homes with and without nursing that are owned by those providers accepted onto the framework agreement plus the 8 BUPA managed care homes with and without nursing on the block contract will be evaluated on an annual basis in accordance with the system that is currently being introduced as part of the process for monitoring the quality of care homes within Central Bedfordshire.

This quality monitoring system will rate each care home and allocate them to a quality performance band, similar to the Ofsted system of rating schools. Each care home will initially be given a score within the five domains of the quality monitoring system based on the monitoring visits that have been carried out in the 18 month period from April 2012 to October 2013.

These scores will then be aggregated to give a composite score that equates to one of the following four quality performance bands:

1. Excellent
2. Good
3. Adequate
4. Poor

The allocation of a care home with or without nursing to the 'poor' quality performance band will only take place if the Council has serious concerns about the quality of care being provided, sufficient for it to initiate a process within its Safeguarding Adults Policy and Procedures asking the provider to take remedial action.

If this situation arises outside of the annual performance review of the care homes with and without nursing the Council will immediately downgrade the care home to 'poor' until the provider resolves the issues that the Council has identified and the care home moves out of serious concerns and is able to improve its quality performance band to 'adequate' or higher.

In these circumstances the Council will not immediately move customers to another care home with or without nursing but it would not place any new customers within a care home with or without nursing that has been assessed as 'poor'.

The Council will work with the provider of any care home with or without nursing identified as 'poor' for a period of six months to help it rectify the causes of the serious concerns and improve the quality of the services. If there has been no improvement after this period the Council will reduce its contract price and consider whether to offer customers places within other higher quality care homes with and without nursing.

During the contract period of the framework agreement a formal annual review of the quality of each care home will take place in which the previous twelve months monitoring information will be considered and the quality performance rating and contract price of the care homes adjusted as necessary. This will be implemented immediately following the review date.

Meeting: SCHH Overview & Scrutiny Committee
Date: 9 September 2013
Subject: Winterbourne View Progress Report
Report of: Cllr Carole Hegley , Executive Member for Social Care Health & Housing
Summary: This report provides an update on the progress and key work streams which are being undertaken by health and social care partners in Central Bedfordshire in response to the severe concern highlighted by the Panorama undercover programme at the Winterbourne View Private Hospital in May 2011 for people with a learning disability and the subsequent Department of Health enquiry.

Advising Officer: Julie Ogley, Director of Social Care Health & Housing
Contact Officer: Elizabeth Saunders, Assistant Director, Commissioning
Public/Exempt: Public
Wards Affected: All
Function of: Bedfordshire Clinical Commissioning Group and Central Bedfordshire Council

CORPORATE IMPLICATIONS

Council Priorities:

1. This report supports the following Council Priority the report which is:
 - Promote health and wellbeing and protecting the vulnerable.

Financial:

2. A Section 75 arrangement is part of the National Health Service Act 2006 and provides an enabling framework between Health and Local Authorities, which allows for the pooling of social care and health funding and/or allows for social care funding to be delegated to an NHS body to deliver a social care function

This option appraisal will identify which budgets within the BCCG and the Social Care, Health and Housing Directorate could potentially be pooled to support with the commissioning of packages of care for individuals with complex learning disability and /or autistic needs who also have severe challenging behaviour.

Proposed that support in the development of the financial options appraisal being undertaken by the BCCG is provided by the corporate financial service team which supports the SCHH Directorate

There is also the potential for additional support to be provided through the Joint Improvement Programme.

Legal:

3. Under the new arrangements for health introduced in the Health and Social Care Act 2012 there is a general expectation that local authorities and health service bodies will look for opportunities to integrate services to advance the health and well-being of the people in their area. The Health and Wellbeing Board is under a statutory duty to encourage the local authority and the BCCG to work in an integrated manner. This report explains the steps that are being taken to secure a more integrated approach towards the provision of services for people with learning disabilities. In due course, once a business case has been approved the arrangements are likely to be formalised in an agreement made with the BCCG under Section 75 of the NHS Act 2006 which will provide the legal framework for the operation of a pooled budget.

Risk Management:

4. The activities outlined in this report will be overseen through the Health and Wellbeing Board and also through the Learning Disability Partnership Board as part of the HCOP governance arrangements. The Learning Disability Partnership Board will monitor risks, issues and progress against agreed plans. The BCCG will also monitor progress through the Learning Disability and Mental Health Change Management Board (former QIPP Programme Board for LD and MH) and is taking a project management approach to draw up a risk log.

Staffing (including Trades Unions):

5. Not Applicable.

Equalities/Human Rights:

6. Public authorities have a statutory duty to advance equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
7. The approach being taken in meeting the requirements set out in the Winterbourne View DOH investigation and report is designed to support more locally based, inclusive support services, for people with a learning disability and autism, to more positively manage risk elements in their lives which are due to communication issues which result in challenging behaviour.
8. A formal Equality Impact Assessment (EIA) has not been carried out for the Winterbourne View work streams so the proposal is that CBC offer to support BCCG in undertaking the EIA and embedding learning from this into the actions being taken forward.

The EIA will also include consideration of human rights implications.

Public Health

9. The approach being taken will give opportunities for people to have their care and support delivered closer to home and not in a more restrictive inpatient hospital setting, as well as looking to develop higher levels of independence. Though the actions being outlined in this report focus on support in relation to challenging behaviour needs, the development of an enhanced local support service will also mean that more preventive work can be undertaken with individuals to improve not only their mental but physical health as well. This will also assist with addressing inequalities in meeting the health needs of people with learning disabilities, so that through for example; better access to behaviour management self help techniques and screening programmes, their health outcomes are brought more in line with the general population.

Community Safety:

10. Not Applicable.

Sustainability:

11. Not Applicable.

Procurement:

12. Not applicable. Any procurement will be lead by BCCG for the development of the Community based specialist support service. However CBC Corporate Procurement will support with the evaluation panel process.

RECOMMENDATION(S):

The Committee is asked to:-

1. **To note progress on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings**
2. **To note progress on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements**
3. **To note progress on the development of the service specification and implementation of the Bedfordshire wide specialist community support service for people who's behaviours may challenge**
4. **To note progress report on work with Children's Services around the transition process**

Introduction and Background Information

13. On the 31 May 2011, a BBC Panorama television programme showed people with challenging behaviour being abused by staff at a private hospital called Winterbourne View. Following this programme the hospital was subsequently closed.
14. The abuse which took place at Winterbourne View was deeply disturbing and shocking and was assessed as criminal. The kinds of abuse which was uncovered covered a range of physical and emotional forms.

15. The Minister of State Paul Burstow commissioned the Department of Health, (DOH) to carry out a full review into what had happened at Winterbourne View. The overall aim was to identify what went wrong but also look at what lessons could be learned so that care and support for people with challenging behaviour, who also may have associated learning disability and/or autism was being delivered in the most appropriate setting and was of a good quality.
16. The final report from the DOH was published in December 2012 and from this a mandatory requirement was set on every Clinical Commissioning Group (CCG) and Local Authority in England and Wales to develop a localised plan which would address the following areas to demonstrate that better outcomes and safe practice was being delivered for people with learning disabilities or autism who have behaviours which challenge.
17. To address the issues set out in the DOH Report a Bedfordshire wide Winterbourne View response coordination group was set up on the 4th February 2013. This comprises of representatives from the BCCG and Central Bedfordshire and Bedford Borough Councils.
18. The BCCG as the lead agency coordinated the development of a cross Bedfordshire Action Plan and the Bedfordshire Steering Group will continue to operate and provide the monitoring of the delivery of the various actions.
19. A Central Bedfordshire focused Steering Group has now been established to ensure that these wider actions and targets as set out for Central Bedfordshire are achieved.

The following areas are the main focus for activity for June 2013 to June 2014:

20. **In Patient Hospital Review Process**

Everyone with a learning disability who is in a hospital setting now will have had a comprehensive review of their needs carried out before the end of June 2013, with the aim for those who do not need hospital care to be moved to a community setting by 1st June 2014.

21. **Development of Joint Strategic Plan and Service Developments**

Every CCG area will have a locally agreed joint plan for improving services for people whose behaviours challenge.

22. **Monitoring Quality of Service Delivery and Care**

Providers of Services will be held accountable for poor care and contractual arrangements need to be robust with monitoring mechanisms which ensure areas of concern are addressed. This includes safe prescribing practice for medication.

23. **Additional Work streams:**

Safeguarding

Winterbourne View Stock Take

Children's and Adult Services Commissioning

Appendix A. Table of the Winterbourne View Actions

Appendix B. Winterbourne View Stock Take Submission

Detailed Recommendations

24. **In Patient Hospital Review Process**

The BCCG have established a list of all NHS funded people with challenging behaviour placed in independent hospital settings. This register has been shared with the local authority and is reviewed as part of the Winterbourne Central Bedfordshire steering group meetings.

All of these individuals have had a care needs review carried out which was completed by the 1st June 2013, following which a number of people have been identified as needing to move from low secure hospital placements. The completion of the reviews met the stringent targets set out in the recommendations of the DOH Report.

25. Of the reviews carried out:

3 have been carried out by the National Specialist Commissioning Group and a formal feedback meeting has been arranged with colleagues from the National Specialist Commissioning Group on the 30th August 2013 to discuss the outcomes of the reviews which they have carried out, so that individual discharge support plans can begin to be put together for each individual. From the information received from the Specialist Commissioning Group by BCCG in preparation for this meeting in August, all 3 individuals have now been deemed ready for discharge, which is a change from the initial feedback given in June which indicated possible continuation of need for treatment.

26. 5 further reviews have been carried out jointly between CBC and BCCG which have resulted in discharge support plans being put in place to commence the process of moving the individuals to alternative, non hospital based accommodation. This process will be driven forward in a timely way, and will be completed by June 2014.

27. **Development of Joint Strategic Plan and Service Developments**

A local assessment and diagnosis support for Autism has been commissioned locally and began on 1 July 2013. This has replaced the previous commissioned service which was based at the South London Maudsley Hospital, meaning people no longer have to physically travel a considerable distance to receive assessments for a formal diagnosis of autism. As part of the agreed local model to support post diagnosis, Autism Development Workers have been appointed to Central Bedfordshire and they will provide long term support and signposting.

28. There is now in place a comprehensive programme for training in relation to Autism; it is delivered by a person with autism and a psychologist. There are currently two levels of autism training which is provided: the first targeted at front line practice staff, receptionists, leisure staff etc, the second at social workers, mental health nurses, GPs and care home staff. The training has been well attended and the feedback has been excellent.

29. The progress being made within Bedfordshire against the National Autism Strategy – Fulfilling and Rewarding Lives has been highlighted as good practice by the National Autistic Society.

30. The current Central Bedfordshire Learning Disability Commissioning Strategy is being refreshed. Information from this and the JSNA will be used by the BCCG and CBC to put in place a Joint Strategic Plan to develop the proposals for a revised treatment and support service, which is currently provided by SEPT Specialist NHS Trust based in Bedfordshire which will better support people with challenging behaviour to:

- (a) Avoid inpatient admission
- (b) Support through a care and treatment plan individuals in the community
- (c) Avoid having to make out of county placements-particularly to private hospitals

The timescales for the procurement of this service are currently being agreed between BCCG, CBC and BBC.

31. There are currently no pooled budget arrangements in place between CBC and BCCG, for learning disability spend. A business case, which will include a full financial options appraisal for developing this will also form part of the Joint Strategic Plan and is being scheduled to be completed by November 2013. Financial spend for BCCG and CBC for Continuing Health Care (CHC) and s117 aftercare packages can currently be delivered on a shared basis, along with joint monitoring of the care packages. In relation to these individual packages, BCCG and CBC leads have been developing a local protocol for the provision of s117 aftercare and a register of the individuals entitled to this, is now in place.
32. **Monitoring Quality of Service Delivery and Care**
- The quality of care funded by BCCG through CHC is monitored by the lead nurses and contract manager. There are clear guidelines in place for escalating concerns in the delivery of care to the Quality Team who have identified leads for mental health and learning disabilities, safeguarding, infection control and tissue viability. There is a named lead for those people subject to s117 aftercare, regular reviews are undertaken and links with the quality team are the same. In addition, there are regular commissioner, quality and contract lead meetings to discuss quality and performance. The CCG are engaged in Central Bedfordshire's framework for monitoring care homes within their locality, including attendance at information sharing meetings with the CQC. Issues regarding providers are discussed at the Patient Safety and Quality Committee and reports are escalated to the Executive Team when required.
33. The quality of care for those providers funded by Central Bedfordshire Council, is designed to ensure all social care residential, nursing, and domiciliary care providers who are regulated by CQC have in place a contract with The Council and are then monitored against the service specification elements of the contract to ensure good quality outcomes for the people and their families using the services.
34. The monitoring tool used is the ADASS East of England Contract Quality Workbook and comprises of a set of standards aligned to the CQC Essential Standards of care, but these are structured to look into how the service is involving its service users in all aspects of the planning and delivery of care; focusing on meaningful outcomes for individuals. For learning disability providers, this also includes how risk and behaviour management support is provided on a person centred and proactive basis. In addition, for Domiciliary Care Agencies on the CBC Framework, electronic monitoring via CM2000 is in place which performance monitors, duration, missed/late calls and consistency of carer. However this process is also informed by input provided by individual care management reviews, information from CHC or tissue viability nursing reviews, safeguarding alerts and from complaints and compliments supplied by the Customer Service Team.

35. As part of the Joint Strategic Plan, a proposal will be considered which looks at the options for aligning or integrating the health and social care contract monitoring function of the BCCG and CBC, to promote consistency of approach.
36. The use of antipsychotic and antidepressant medication is monitored by pharmacists. Progress on this specific project has started and there is a project at present reviewing prescribing in care homes for people with mental health needs and this is managed through the Mental Health Change Board. The scope of this work is still being developed locally to include people with a learning disability and/or autism and will report into the Winterbourne Steering Group.

37. **Additional Work streams:**

Safeguarding

Safeguarding is at the core of the findings of the Winterbourne DOH report and the recommendations which have been set out in the Care and Support Bill, will be implemented fully by the Bedfordshire Safeguarding Board. Specifically in relation to Deprivation of Liberty a programme of direct face to face information sharing sessions by the CBC Safeguarding Team with providers, will ensure that managing authorities responsible for the care of people with a learning disability understand their responsibilities in identifying potential deprivation of liberty safeguards, and apply for authorisations accordingly.

38. **Winterbourne View Stock Take**

The Winterbourne View Joint Improvement Programme also asked local areas to complete a stock take of progress against the commitments made nationally that should lead to all individuals receiving personalised care and support in appropriate community settings no later than 1 June 2014. The stock take was completed and submitted on the 5th July 2013.

39. The purpose of the stock take was to enable local areas to assess their progress and for that to be shared nationally. The stock take also is intended to enable local areas to identify what help and assistance they require from the Joint Improvement Programme and to help identify where resources can best be targeted. At the meeting with the BCCG and the Specialist Commissioning Group on the 30th August 2103, it will be discussed if local support from the Joint Improvement Programme could be requested to assist with the development of the Business Case looking at the financial options appraisal around establishing a pooled budget.

Appendix B provides a copy of the stock take submission.

40. **Children's and Adult Services Commissioning**

Work has also begun through the Support and Aspirations Board looking at the transitions process for children with disabilities moving into adult services to ensure that there is joined up planning to meet the projected demand and needs of children in transition. Initial 5 year profile of transitions demand has been produced, which shows social care need, however this needs to also capture children's needs who are health funded.

Conclusion and Next Steps

41. To note progress on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings.

42. To note progress on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements.
43. To note progress on the development of the service specification and implementation of the Bedfordshire wide specialist community support service for people who's behaviours may challenge; including the procurement timescale.
44. To note progress on work with Children's Services around the transition process.

Appendices:

Appendix A – Table of Winterbourne View Actions Completed/Outstanding.

Appendix B – Winterbourne View Stock Take.

Appendix A: Table of the Winterbourne View Actions

| Action Plan Area | Completed | Outstanding | Comment |
|--|-----------|-----------------------|---|
| Setting up of Bedfordshire Register of People in Inpatient Hospitals | 01/04/13 | | For Central Bedfordshire- 8 individuals meet the definition of inpatient status. Register to be maintained by designated Project Officer in the BCCG |
| Full Reviews to be Carried out by 01.06.13 to determine if individuals still Require inpatient hospital treatment services. | 01/06/13 | | For Central Bedfordshire of the 8 individuals: 3-reviewed by SCG 5-reviewed by BCCG and CBC All the individuals have been identified as read for discharge |
| All individuals defied for discharge form in patient hospital to have been moved to alternative Community based care/accommodation support by 01.06.13 | | Timescale by 01.06.14 | Meeting with SCG on 30.08.13 for BCCG and CBC to go through the 3 reviews they have carried out. Discharge support plans developed by SCG will be transferred to BCCG/CBC to check and then lead on making happen. For the 5 CBC/BCCG reviews-discharge support plans in place and moves beginning to be actioned. Draft Service Specification drawn up to develop a local intensive community based support service designed to prevent hospital admissions and meet peoples needs in their existing community. procurement timescale to be agreed between BCCG and CBC |

| Action Plan Area | Completed | Outstanding | Comment |
|--|-----------|--|---|
| Joint Strategic Plan to be developed. | | Timescale by 30.11.13 | Joint Plan to be finalised which will included: Business Case with financial options appraisal for putting in place pooled budget arrangements |
| For local autism services to follow NICE clinical standards | 01.07.13 | | Local diagnostic service in place and service specification underpinned by NICE guidelines |
| Local health and social care commissioners to plan strategically to meet the needs of Children with LD/autism moving into adult services | | Timescale determined through the Support and Aspirations Board | Initial transitions data collection of next 5 years information for children who will be coming into Adult Services shared with LD Adult Services 14.08.13. Further more detailed progress report required. |
| Strengthen local quality assurance and monitoring arrangements of provider services. | 01.04.13 | | Though both BCCG and CBC have in place service/contract monitoring systems, exploration of opportunities for further alignment/integration of these functions could be considered. |
| Provider Operate Safer Recruitment Practices | 21.06.13 | | Both BCCG and CBC monitoring processes checked and do require providers to evidence safer recruitment processes which they have. |
| Safeguarding and role of Safeguarding Boards | 01.04.13 | | There is currently a joint Bedford & Central Bedfordshire Adult Safeguarding Board in place with all core members identified and in place ready for implementation of the Care and Support Bill |

| Action Plan Area | Completed | Outstanding | Comment |
|--|-----------|------------------------------------|---|
| Provider understanding of the DOL's process | | Timescale to commence- 16.08.13 | Series of provider sessions to be run by CBC Safeguarding Team to inform providers of the requirements around DOL's |
| Whistleblower Procedures | 21.06.13 | | Both BCCG and BC monitoring processes checked and do require providers to evidence whistleblower procedures in place and also where investigations have taken place based on disclosures. |
| Appropriate Use of Antidepressant Medication | | Timescale being determined by BCCG | BCCG review of use of anti-depressant medication has commenced in Mental Health services-to be widened to include LD/autism services as well |

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Winterbourne View Joint Improvement Programme

Initial Stocktake of Progress against key Winterbourne View Concordat Commitment

The Winterbourne View Joint Improvement Programme is asking local areas to complete a stocktake of progress against the commitments made nationally that should lead to all individuals receiving personalised care and support in appropriate community settings no later than 1 June 2014.

The purpose of the stocktake is to enable local areas to assess their progress and for that to be shared nationally. The stocktake is also intended to enable local areas to identify what help and assistance they require from the Joint Improvement Programme and to help identify where resources can best be targeted.

The sharing of good practice is also an expected outcome. Please mark on your return if you have good practice examples and attach further details.

This document follows the recent letter from Norman Lamb, Minister of State regarding the role of HWBB and the stocktake will provide a local assurance tool for your HWBB.

While this stocktake is specific to Winterbourne View, it will feed directly into the CCG Assurance requirements and the soon to be published joint Strategic Assessment Framework (SAF). Information compiled here will support that process.

This stocktake can only successfully be delivered through local partnerships. The programme is asking local authorities to lead this process given their leadership role through Health and Well Being Boards but responses need to be developed with local partners, including CCGs, and shared with Health and Wellbeing Boards.

The deadline for this completed stocktake is Friday 5 July. Any queries or final responses should be sent to Sarah.Brown@local.gov.uk

An easy read version is available on the LGA [website](#)

May 2013

Appendix B

| Winterbourne View Local Stocktake June 2013 | | | |
|---|--|---|-------------------------|
| 1. Models of partnership | Assessment of current position evidence of work and issues arising | Good practice example (please tick and attach) | Support required |
| 1.1 Are you establishing local arrangements for joint delivery of this programme between the Local Authority and the CCG(s). | Yes -these have been put in place. Multi-agency joint action plan has been agreed between: Bedfordshire Clinical Commissioning Group (BCCG), Central Bedfordshire Council, (CBC) and Bedford Borough Council. | √ Ref doc WV1 Pan Bedfordshire Winterbourne View Plan | No |
| 1.2 Are other key partners working with you to support this; if so, who. (Please comment on housing, specialist commissioning & providers). | Yes – (CBC) are working with East of England Specialist Commissioning Group, , Central Bedfordshire Children’s Services Central Bedfordshire Community Safety Partnership, South Essex Partnership NHS Trust(SEPT the local specialist NHS provider of LD services) input from service users and cares through the LD Delivery Partnership Board and Voluntary and Community Sector organisations- Autism Bedfordshire. To ensure that from a Central Bedfordshire perspective specific actions are monitored and followed through a Central Bedfordshire Steering Group has also been established. This will report through the LD Delivery Partnership as part of the Health and Wellbeing Board governance structure and also the Pan=Bedfordshire BCCG Lead Steering Group. | √ Ref doc WV2 Central Bedfordshire Action Plan | No |
| 1.3 Have you established a planning function that will support the development of the kind of services needed for those people that have been reviewed and for other people with complex needs. | Yes- BCCG as the lead agency has established a Pan-Bedfordshire steering group with CBC and BBC, to establish a planning function in response to the Winterbourne View Final Report and actions required. The steering group has undertaken a scope of local services and have completed a draft Service specification for the kinds of resources required to meet the needs of individuals who have been reviewed and for other people with complex needs in out of county | √ Ref doc WV3 Draft Service Specification | No |

Appendix B

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| | placements. | | |
| 1.4 Is the Learning Disability Partnership Board (or alternate arrangement) monitoring and reporting on progress. | Yes- The LD Delivery Partnership Board has received a presentation about Winterbourne View and this will be a regular agenda item. Progress reports are also made by the BCCG to the Patient Safety and Quality Committee. | Ref doc WV4 Winterbourne View Presentation | No |
| 1.5 Is the Health and Wellbeing Board engaged with local arrangements for delivery and receiving reports on progress. | Yes. - A progress report has been provided to the CBC Healthier Communities and Older People Board on 12.06.13, which is part of the Health and Wellbeing Board governance structure in preparation for a more comprehensive update which will be presented to the Health and Well being Board in September 2013. | Ref doc WV5 HCOP Report | No |
| 1.6 Does the partnership have arrangements in place to resolve differences should they arise. | Yes- This is in place through the Pan Bedfordshire Winterbourne Steering Group involving Health and Social Care Commissioners and operational leads. | No attachment | No |
| 1.7 Are accountabilities to local, regional and national bodies clear and understood across the partnership – e.g. HWB Board, NHSE Local Area Teams / CCG fora, clinical partnerships & Safeguarding Boards. | Yes- Accountabilities are understood across the partnership through boards such as the LD Delivery Partnership Board, The Health and Wellbeing Board, BCCG Patient Safety and Quality Group, BCCG QIPP Programme Board, Fulfilling Lives (Autism) Delivery Board, Safeguarding Board, and through Regional Forums, such as the East of England ADASS Contracting Operational Group keeping track of accountabilities in line with the Winterbourne Recommendations. | No attachment | No |
| 1.8 Do you have any current issues regarding Ordinary Residence and the potential financial risks associated with this. | Yes- CBC and the BCCG are looking with partners in BBC at potential financial risk of increased costs associated with ordinary residence due to a private hospitals on its boarder, which services are often commissioned on behalf of individuals from London Borough's who may fall under CBC's responsibility due to the changes in legislation under the | No attachment | No |

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| | Mental Health Act and the rules of ordinary resident. | | |
| 1.9 Has consideration been given to key areas where you might be able to use further support to develop and deliver your plan. | Yes- for example through further local intelligence needed to inform future plans about children's services and assisting younger people through transitions to enable a better local offer to be planned to prevent out of county admissions to residential care services. (Please see Section 10 of the stock take) | No attachment | No |
| 2. Understanding the money | | | |
| 2.1 Are the costs of current services understood across the partnership. | Yes- Service user/ patient lists have been agreed with BCCG and are being maintained to reflect current costs of services and to identify lead commissioners. | No attachment | No |
| 2.2 Is there clarity about source(s) of funds to meet current costs, including funding from specialist commissioning bodies, continuing Health Care and NHS and Social Care. | Yes- CBC and BCCG have agreed the sources of all packages of care and support and have identified the funding sources determining lists of those who are CHC, Section 117, or Joint Health And Social Care Funded. | No attachment | No |
| 2.3 Do you currently use S75 arrangements that are sufficient & robust. | Yes-Section 75 agreements are in place in respect of Community Mental Health Services provided by South Essex Partnership University NHS Foundation Trust (SEPT) and between SEPT and Adult Learning Disability Services in respect of integrated working by Community Nurses within the Adult Learning Disability Team in Central Bedfordshire There is no additional pooled budget at this moment in time in respect of Winterbourne View Action plans. | No attachment | No |
| 2.4 Is there a pooled budget and / or clear arrangements to share financial risk. | Yes-Clear arrangements are in place for CHC applications and Section 117 funding agreements in respect of aftercare services. BCCG and CBC have completed a draft protocol to support a process for agreeing Sec 117 funding. Through reviews and discussions about changing needs financial risks are shared. | No attachment | No |
| 2.5 Have you agreed individual contributions to any pool. | Not at present. As part of the work around responding to Winterbourne View consideration will be given to identifying future pooled budget arrangements. | No attachment | No |
| 2.6 Does it include potential costs of young people in transition and of children's services. | CBC have identified the potential costs of future transition cases from children's services over the next 5 years, particularly in relation to young people with challenging | | |

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| | behaviour and complex needs to assist with commissioning arrangements and local planning. (Please see Section 10 of the stock take) | No attachment | No |
| 2.7 Between the partners is there an emerging financial strategy in the medium term that is built on current cost, future investment and potential for savings. | Yes- through the identified costs of the individuals in low secure hospital settings, high costs out of county residential care placements, and 5 year forecast. Plans are emerging about services which may result in possible anticipated efficiencies through sharing procurement and contracting information between health and social care commissioners. | No attachment | No |
| 3. Case management for individuals | | | |
| 3.1 Do you have a joint, integrated community team. | Yes- through a section 75 agreement the Adult Learning Disability Services employ Community Nurses who work alongside the Local Authority Care Management Service. Specialist Learning Disability Services for people with a learning Disability operated by SEPT are not integrated into the agreement. | No attachment | No |
| 3.2 Is there clarity about the role and function of the local community team. | Yes- an operational policy for the Adult Learning Disability Team sets out the clear roles and responsibilities of the Community Nurses and the Social Workers who make up the core team. Additional support coordinated by the Team is through the Health Facilitators, two of which are co-located with the Team and provide more specialist clinical support and interventions. | No attachment | No |
| 3.3 Does it have capacity to deliver the review and re-provision programme. | Yes- through joint working with commissioners from health and social care services. Specific team members have been identified to take lead coordinating roles in relation to organisation and carrying out of the reviews. | No attachment | No |
| 3.4 Is there clarity about overall professional leadership of the review programme. | Yes-clear structure has been put in place with identified leads in health (under the BCCG) or front line case managers in the community team, (Adult Learning Disability Services).The BCCG lead links directly with the SCG for those individuals funded by the SCG, while the Adult Learning Disability Team links directly with BCCG for those people funded by the BCCG. | No attachment | No |

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| 3.5 Are the interests of people who are being reviewed, and of family carers, supported by named workers and / or advocates. | Yes- all reviews undertaken have involved the individual, the carer/ family member or independent advocate, supported by named workers. The reviews have been carried out through the principles of placing the person at the centre of their decision making. | No attachment | No |
| 4. Current Review Programme | | | |
| 4.1 Is there agreement about the numbers of people who will be affected by the programme and are arrangements being put in place to support them and their families through the process. | Yes- In CBC there are 3 individuals in low secure hospital settings in the current review programme, which we consider to be part 1 of the programme and have been reviewed by the SCG. Another 5 individuals have been reviewed directly by CBC as their funding is provided through the BCCG. We have identified another 6 other individuals who will fall under phase 2 of the review programme and these represent people who are in out of county placements (non hospital settings) who have complex needs (autism / mental health needs, or behaviour that challenges) and are either fully funded or jointly funded under sec 117 funding or Continuing Health Care. Reviews are also arranged for each individual, with family involvement and advocacy as required. | No attachment | No |
| 4.2 Are arrangements for review of people funded through specialist commissioning clear. | Yes- arrangements are clear and emphasis is being placed on the need for clear communication and joint partnership working. A meeting was set up between Bedford Clinical Commissioning Group, the Borough Council and the specialist commission group but the representative did not arrive at the correct venue. This is to be rearranged as a priority. | No attachment | No |
| 4.3 Are the necessary joint arrangements (including people with learning disability, carers, advocacy organisations, Local Healthwatch) agreed and in place. | Clarification will be gained from the SCG to check what forms the reviews they have carried out took, as currently appears that these were desk top paper reviews. This clarification will look at how involved the Individuals, their families and other key stakeholders were with the review process. | No attachment | No |
| 4.4 Is there confidence that comprehensive local registers of people with behaviour that challenges have been developed and are being used. | Yes- Registers are in place and individuals on the registers have been agreed between the BCCG and CBC. B CCG holds the register. | No attachment | No |

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| 4.5 Is there clarity about ownership, maintenance and monitoring of local registers following transition to CCG, including identifying who should be the first point of contact for each individual | Yes- B CCG holds and owns the register and all known individuals and a key first point of contact has been identified for each case. | No attachment | No |
| 4.6 Is advocacy routinely available to people (and family) to support assessment, care planning and review processes | Yes- CBC, BBC and BCCG jointly commission POHWER advocacy services to support the assessment, care planning and review process. Independent Mental Capacity Advocates and Independent Mental Health Advocates are also involved in the process as required. | No attachment | No |
| 4.7 How do you know about the quality of the reviews and how good practice in this area is being developed. | CBC have developed a template to include in all Winterbourne Reviews to make sure that the reviews followed best practice. This has been shared with the BCCG and used as a way of assessing an individual's current and future needs. | Agreed JO-attach review process | No |
| 4.8 Do completed reviews give a good understanding of behaviour support being offered in individual situations. | Yes- Details about support in current placement have been established, with specific focus on the best ways to communicate with individuals and proactive behavioural management techniques and there is a good understanding about levels of support required in the future. | No attachment | No |
| 4.9 Have all the required reviews been completed. Are you satisfied that there are clear plans for any outstanding reviews to be completed. | Yes-All reviews were completed by 1 st June 2013. There are no outstanding reviews for individuals in hospital- low secure settings. | No attachment | No |
| 5. Safeguarding | | | |
| 5.1 Where people are placed out of your area, are you engaged with local safeguarding arrangements – e.g. in line with the ADASS protocol. | Yes-CBC adheres to the ADASS protocol and has adopted the ADASS <i>Safeguarding Adults Policy Network Guidance (December 2012)</i> for Out-of-Area Safeguarding Adults Arrangements. CBC and Luton Borough Council have recently (January 2013) renegotiated our arrangements in respect of our shared acute hospital trust which sits within Luton Boundaries, so that the arrangements adhere to the ADASS protocol but that information sharing is ensured. | No attachment | No |
| 5.2 How are you working with care providers (including housing) to ensure sharing of information & develop risk assessments. | Yes-Safeguarding lead standing attendance at Council providers forums; safeguarding support workers relationship building and awareness raising with local care homes on a "patch" basis; contracts compliance officers monitoring of | No attachment | No |

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| | use of safeguarding standards and safeguarding competency framework; safeguarding officers visits to providers of concern; safeguarding officers awareness raising sessions across all providers including housing, | | |
| 5.3 Have you been fully briefed on whether inspection of units in your locality have taken place, and if so are issues that may have been identified being worked on. | Yes-Regular information sharing meetings held with CQC attended by safeguarding, contracts and social care operational managers. | No attachment | No |
| 5.4 Are you satisfied that your Children and Adults Safeguarding Boards are in touch with your Winterbourne View review and development programme. | Yes-Children's services managers and adult safeguarding manager are members of the CBC Winterbourne View steering group. Developments reported to the Safeguarding Adults Board through the safeguarding manager. | No attachment | No |
| 5.5 Have they agreed a clear role to ensure that all current placements take account of existing concerns/alerts, the requirements of DoLS and the monitoring of restraint. | Yes- Reviews of all current placements held by CBC have been undertaken and safeguarding and DoLS considered. One person is known to be under DoLS. | No attachment | No |
| 5.6 Are there agreed multi-agency programmes that support staff in all settings to share information and good practice regarding people with learning disability and behaviour that challenges who are currently placed in hospital settings. | Yes-Both acute hospitals feeding into CBC area have learning disability lead nurses and clear protocols to flag when people with a learning disability are admitted. These have been presented to the safeguarding adults' board sub groups. CBC does not have any independent learning disability hospitals in its locality. | No attachment | No |
| 5.7 Is your Community Safety Partnership considering any of the issues that might impact on people with learning disability living in less restrictive environments? | Yes-The community safety partnership and the safeguarding adults' board are currently working together on hate crime and discrimination. Two reports have been commissioned and shared respectively and an action plan is being drawn up. Safeguarding officers sit on MARAC, SARAC and ASBRAC to address domestic and sexual abuse and anti social behaviour concerns where they affect vulnerable people | No attachment | No |

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| | The Joint Social Needs Assessment is being further updated at present to include the actions required under the Winterbourne View recommendations. | | |
| 5.8 Has your Safeguarding Board got working links between CQC, contracts management, safeguarding staff and care/case managers to maintain alertness to concerns. | Yes. See 5.2 and 5.3 above. | No attachment | No |
| 6. Commissioning arrangements | | | |
| 6.1 Are you completing an initial assessment of commissioning requirements to support peoples' move from assessment and treatment/in-patient settings. | Yes- We are reviewing commissioning arrangements for learning disability services, specifically to include supporting people's moves from hospital settings to settings better suited to meet their needs (either specialist residential carer or supported living services. We are completing the campus closure programme and also will also be service reviewing historic supported living contracts with a view to fitness for purpose and will be recommending decommissioning, reconfiguring and recommissioning as necessary. The current LD Commissioning Strategy provides a broader steer in terms of future plans for the wider group of individuals who are placed out of county and our commitment to support people to come back to their local area if this is appropriate. This is currently being refreshed to ensure that it fully captures all the recommendations set out in the Winterbourne View Report | Ref doc WV6 Autism Strategy | No |
| 6.2 Are these being jointly reviewed, developed and delivered. | Yes- plans are emerging and are at an early stage following outcomes of the reviews held. Due to structural and staffing changes within CBC Commissioning, we are reviewing existing arrangements and firming up our commissioning resource. We have managed to secure an additional post, which has been recruited to, and the post holder will be able to support much of this programme. | No attachment | No |
| 6.3 Is there a shared understanding of how many people are placed out of area and of the proportion of this to total numbers of people fully funded by NHS CHC and those jointly supported by health and care services. | Yes. Lists are held by the BCCG and agreed by the local authority. All funding streams in place are confirmed in terms of CHC, Section 117 and Joint funding arrangements. | No attachment | No |

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| 6.4 Do commissioning intentions reflect both the need deliver a re-provision programme for existing people and the need to substantially reduce future hospital placements for new people. | Yes-the current commissioning intentions reflect this, and following the in depth service review, a commissioning and procurement strategy will be put in place to deliver this over a three year period. | No attachment | No |
| 6.5 Have joint reviewing and (de)commissioning arrangements been agreed with specialist commissioning teams. | This needs to be confirmed. A meeting was arranged for the specialist commissioner of the strategic clinical commissioning group (SCG) to meet with BCCG, CBC and BBC Leads from the Pan-Bedfordshire Winterbourne Steering Group. This meeting is a high priority to be rescheduled as the SCG did not arrive. | No attachment | No |
| 6.6 Have the potential costs and source(s) of funds of future commissioning arrangements been assessed. | This is currently being scoped. A 5 year forecast is estimated in terms of needs and costs of those individuals coming thorough health and social care services. Information is to be further ratified to ensure all known needs are captured to inform future commissioning arrangements. | No attachment | No |
| 6.7 Are local arrangements for the commissioning of advocacy support sufficient, if not, are changes being developed. | Yes-CBC, BBC and BCCG Team jointly commission POhWER advocacy services to support the assessment, care planning and review process. Independent Mental Capacity Advocates and Independent Mental Health Advocates are also involved in the process as required. We are able to purchase as necessary using a personal budget advocacy support for individuals in out of area placements if local advocacy services are not available for any reason. POWhER are jointly commissioned and subject to joint contract review arrangements. The POWhER advocacy service holds locality groups in key services areas across Central Bedfordshire to gain the view of people who use services in the local community. | For more information on the range of advocacy services provided please go to www.pohwer.net | No |
| 6.8 Is your local delivery plan in the process of being developed, resourced and agreed. | Yes- plans are emerging as described in the Joint Improvement Plan in 1.1 and 1.2 of this stocktake. | No attachment | No |
| 6.9 Are you confident that the 1 June 2014 target will be achieved (the commitment is for all people currently in in-patient settings to be placed nearer home and in a less restrictive environment). | Yes-CBC and the BCCG have an absolute commitment to work to this target and are fully determined to achieving desired outcomes for the individuals concerned. We are working with the individuals on a person centred basis to ensure that any potential plans concerning moves are made with full consideration of personal choice, availability of | No attachment | No |

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| | resources nearer to home (for some this may not be Central Bedfordshire as they did not have any local links to this area prior to hospital admission). We also want to ensure legal timescales for the procurement of service provision, assessments of risk, and mental health status to be fully considered. Though these figures need to be finally confirmed by the SCG initial indications are there are 4 Individuals who will be ready by June 2014 to have moved to community settings, and 3 are likely to require further detention on section under the MHA. However plans following all reviews are for move on appropriate to each individual. | | |
| 6.10 If no, what are the obstacles, to delivery (e.g. organisational, financial, legal). | The considerations described in 6.9 are possible obstacles to achieving the target –especially in relation to ensuring the procurement of any new service is managed appropriately | No attachment | No |
| 7. Developing local teams and services | | | |
| 7.1 Are you completing an initial assessment of commissioning requirements to support peoples’ move from assessment and treatment/in-patient settings. | Yes- Plans discussed in detail at individual Multi- Disciplinary Review. This initial information is being shared with BCCG so that identification of any common needs can be checked and possible commissioning of specialist accommodation based service in the Bedfordshire area can be considered. | No attachment | No |
| 7.2 Do you have ways of knowing about the quality and effectiveness of advocacy arrangements. | Yes- Due to our full involvement at each review held. Which allows social workers carrying out reviews to form an assessment of the effectiveness of individual advocates. Also see Section 6.7 | No attachment | No |
| 7.3 Do you have plans to ensure that there is capacity to ensure that Best Interests assessors are involved in care planning. | Yes- there is adequate access to Best Interest Assessors within CBC Adult Operational Services. | No attachment | No |
| 8. Prevention and crisis response capacity - Local/shared capacity to manage emergencies | | | |
| 8.1 Do commissioning intentions include an assessment of capacity that will be required to deliver crisis response services locally. | Yes- A review of Specialist Learning Disability Services provided by South Essex Partnership NHS Foundation Trust (SEPT) is currently being undertaken. There is capacity to deliver Intensive Support services locally and to work with local providers to assist with the support and management of behavioural plans to prevent placement breakdown and | No attachment | No |

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| | hospital admission. Also see Section 1.3 | | |
| 8.2 Do you have / are you working on developing emergency responses that would avoid hospital admission (including under section of MHA.) | The contract between the BCCG and SEPT outlines in a CUQIN a clear accountability for a reduction to admissions to hospital and this includes admissions under section of the MHA. The preferred model of care is outreach services into the community, so that individuals can be best supported in a familiar environment. | No attachment | |
| 8.3 Do commissioning intentions include a workforce and skills assessment development. | <p>Yes- A Training Needs Analysis matrix for all existing providers is monitored annually by the Contracts Team. In CBC If specific skills deficits identified, CBC Learning and Development Team can commission further specialised training looking at communication and challenging behaviour</p> <p>The CBC Learning and Development Manager carried out an annual training needs analysis and findings from this are incorporated provider workforce skills</p> | No attachment | No |
| 9. Understanding the population who need/receive services | | | |
| 9.1 Do your local planning functions and market assessments support the development of support for all people with complex needs, including people with behaviour that challenges. | <p>Yes- The plans in place as part of the Winterbourne Steering Group demonstrate the emerging plans for identifying the support required to meet individual needs for people whose behaviour challenges.</p> <p>A health Needs Assessment was undertaken in 2011/ 2012 by Public Health prior to the Specialist Services for People with a learning Disability.</p> <p>A Public Health Needs assessment on autism was also undertaken in 11/12-</p> <p>Both of these have been used to assist with informing the CBC JSNA which is actually currently being refreshed for</p> | No attachment | No |

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| | publication September 2013, with this intelligence underpinning the proposal for the development of Bedfordshire accommodation based service for people with more complex communication and behavioural needs. | | |
| 9.2 From the current people who need to be reviewed, are you taking account of ethnicity, age profile and gender issues in planning and understanding future care services. | Yes-these are fundamental aspects which are taken into account. | No attachment | No |
| <p>10. Children and adults – transition planning</p> <p>10.1 Do commissioning arrangements take account of the needs of children and young people in transition as well as of adults.</p> <p>10.2 Have you developed ways of understanding future demand in terms of numbers of people and likely services?</p> | <p>Work in progress. Information sharing has commenced between CBC Adult and Children Services as part of Support & Aspiration developments This will be extended to include BCCG representatives through the transitions project board The heads of Children’s Commissioning and Disability Services are both members of the CBC Winterbourne View Steering Group</p> <p>5-year draft needs analysis completed for children known to Social Care Services. Further work planned to identify and capture all known health funded children.</p> | No attachment | |
| <p>11. Current and future market requirements and capacity</p> <p>11.1 Is an assessment of local market capacity in progress.</p> <p>11.2 Does this include an updated gap analysis?</p> | <p>Yes-existing Market Position Statement has some local market capacity information; however this is being fully revised to show in more detail current and future capacity. Refreshed</p> <p>Yes – The specification developed in line with 1.3 shows that there are not currently enough providers in the CBC locality with the specialist skills to support the needs of all those currently out of county, especially those with complex autism and challenging behaviour.</p> | <p>No attachment</p> <p>No attachment</p> <p>No attachment</p> | No |

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| 11.3 Are there local examples of innovative practice that can be shared more widely, e.g. the development of local fora to share/learn and develop best practice. | Yes- Please see attachments on various areas of innovation in CBC based on good practice. | | |
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Please send questions, queries or completed stocktake to Sarah.brown@local.gov.uk by 5th July 2013

This document has been completed by

Name.....

Organisation.....

Contact.....

Signed by:



Chair HWB

LA Chief Executive

CCG rep.....

Meeting: Social Care Health and Housing Overview & Scrutiny Committee
Date: 9 September 2013
Subject: Work Programme 2012/2013 & Executive Forward Plan
Report of: Richard Carr, Chief Executive
Summary: The report provides Members with details of the current Committee work programme and the latest Executive Forward Plan.

Contact Officer: Paula Everitt, Scrutiny Policy Adviser (0300 300 4196)
Public/Exempt: Public
Wards Affected: All
Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

The work programme of the Social Care Health and Housing Overview & Scrutiny Committee will contribute indirectly to all of the Council priorities.

Financial:

1. Not applicable.

Legal:

2. Not applicable.

Risk Management:

3. Not applicable.

Staffing (including Trades Unions):

4. Not applicable.

Equalities/Human Rights:

5. Not applicable.

Public Health

6. Not applicable.

Community Safety:

7. Not applicable.

Sustainability:

8. Not applicable.

Procurement:

9. Not applicable.

RECOMMENDATION(S):

1. that the Social Care Health and Housing Overview & Scrutiny Committee
 - (a) considers and approves the draft work programme attached, subject to any further amendments it may wish to make;
 - (b) considers the Executive Forward Plan; and
 - (c) considers whether it wishes to add any further items to the work programme.

Work Programme

10. Attached at **Appendix A** is the current work programme for the Committee. The Committee is requested to consider the programme and amend or add to it as necessary. This will allow officers to plan accordingly but will not preclude further items being added during the course of the year if Members so wish and capacity exists.
11. Also attached at **Appendix B** is the latest version of the Executive's Forward Plan so that Overview & Scrutiny Members are fully aware of the key issues Executive Members will be taking decisions upon in the coming months. Those items relating specifically to this Committee's terms of reference are shaded in grey.

Task Forces

12. The Committee has currently established Task Forces to cover the following:-
 - A Joint Health Overview and Scrutiny Task Force to consider the review of acute services in the South East Midlands region (the Healthier Together programme);
 - hospital discharge in Central Bedfordshire; and
 - The strategic change agenda for housing.

Issues of concern raised by partners

13. On 02 July a meeting was held with representatives of the Health and Wellbeing Board, the Tenant Scrutiny Panel and Healthwatch Central Bedfordshire. The Chairmen were asked to outline major areas of work in which they were presently engaged that may be of interest to the Committee. The following items were identified:-

Health and Wellbeing Board

- The experience of patients during the transition from hospital to their home.
- The importance of implementing effective governance structures that enable several organisations to work together towards a single set of objectives and provides a focus on prevention.

Central Bedfordshire Healthwatch

- The role of community nursing
- Hospital discharge and the decision making process involved in a patient being discharged into residential care.
- Enhancing the role of Healthwatch Central Bedfordshire and ensuring that it retains independence

Central Bedfordshire Tenant Scrutiny Panel

The importance of developing effective relationships with tenants that encourage a 'Central Bedfordshire voice' and enhances awareness of the role of the Tenant Scrutiny Panel.

Conclusion

- 14 Members are requested to consider and agree the attached work programme, subject to any further amendments/additions they may wish to make and highlight those items within it where they may wish to establish a Task Force to assist the Committee in its work.

Appendices:

- Appendix A – Social Care Health and Housing OSC Work Programme
- Appendix B – The latest Executive Forward Plan.

Background Papers: (open to public inspection)

None

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Appendix A

Work Programme for Social Care, Health and Housing Overview & Scrutiny Committee 2013 - 2014

| Ref | Indicative Overview & Scrutiny Meeting Date | Report Title | Report Description | Comment |
|-----|---|---|---|--|
| 1. | 21 October 2013 | Annual report of Bedford Borough and Central Bedfordshire Adult Safeguarding Board. | To inform Members of the annual report of the local Adult Safeguarding Board and consider its implications. | For information and comment Executive: TBC |
| 2. | 21 October 2013 | Meppershall Care Home | To receive a report on activities at Meppershall Care Home, and the impact on our customers. | For information |
| 3. | 21 October 2013 | Revenue, Capital and Housing Revenue Account (HRA) Budget Monitoring reports (Q1) | To receive Q1 reports for the Social Care Health and Housing Directorate. | Executive: 24 September 2013 |
| 4. | 21 October 2013 | Performance Monitoring Report (Q1) | To receive the Q1 performance monitoring report for the Social Care, Health and Housing directorate. | Executive: 24 September 2013 |
| 5. | 21 October 2013 | Allocations Policy | To receive and comments on the Allocations Policy | For Members to inform proposals. Executive: 10 December 2013 |

| Ref | Indicative Overview & Scrutiny Meeting Date | Report Title | Report Description | Comment |
|-----|---|---|--|---|
| 6. | 21 October 2013 | CfPS national development area outcomes | To consider a report on the outcomes of the scrutiny development area programme. | The Council was one of 14 areas designated a scrutiny development area as part of a national programme relating to the health reforms. |
| 7. | 16 December 2013 | End of Life Care | A presentation relating to the End of Life Care Pathway in Central Bedfordshire. | Members requested further information in March 2013 and a separate briefing on the Liverpool Care Pathway has been previously circulated. |
| 8. | 16 December 2013 | Domiciliary Care Retender | A 6-month progress report on the implementation and operation of the Domiciliary Care Framework Agreement. | For information as requested by SCHHOSC in March 2013. |
| 9. | 16 December 2013 | Housing Asset Management Strategy | To receive a report on progress made on implementing the Housing Asset Management Strategy | For information and comment. |
| 10. | 16 December 2013 | Revenue, Capital and Housing Revenue Account (HRA) Budget Monitoring reports (Q2) | To receive Q2 reports for the Social Care Health and Housing Directorate. | Executive: 10 December 2013 |
| 11. | 16 December 2013 | Performance Monitoring Report (Q2) | To receive the Q2 performance monitoring report for the Social Care, Health and Housing directorate. | Executive: 10 December 2013 |

| Ref | Indicative Overview & Scrutiny Meeting Date | Report Title | Report Description | Comment |
|-----|---|-----------------------------------|---|---------|
| 12. | 16 December 2013 | Draft Budget 2014/15 | To consider and comment on the Social Care, Health and Housing directorate aspects of the Council's draft budget for 2014/15, Medium Term Financial Plan 2014-18 and Capital Programme 2014/15 to 2017/18. | |
| 13. | 16 December 2013 | Draft HRA Budget | To consider the Council's draft budget report for the Housing Revenue Account (Landlord Service) Business Plan and provide comments to be considered by the Executive at their meeting on 04 February 2014. | |
| 14. | 16 December 2013 | Fees and Charges | To consider and comment on the Social Care, Health and Housing directorate aspects of the draft fees and charges for 2014/15 and comment as appropriate to the Executive. | |
| 15. | 27 January 2014 | Homelessness Strategy | An update on the review of the Strategy. | |
| 16. | 27 January 2014 | East of England Ambulance Service | To receive an update on performance relating to the EoE Ambulance Trust . | |
| 17. | 03 March 2014 | TBC | | |

| Ref | Indicative Overview & Scrutiny Meeting Date | Report Title | Report Description | Comment |
|-----|---|---|--|---------------------------------|
| 18. | 07 April 2014 | Revenue, Capital and Housing Revenue Account (HRA) Budget Monitoring reports (Q3) | To receive Q3 reports for the Social Care Health and Housing Directorate | Executive: 18 March 2014 |
| 19. | 07 April 2014 | Performance Monitoring Report (Q3) | To receive the Q3 performance monitoring report for the Social Care, Health and Housing directorate. | Executive: 18 March 2014 |
| 20. | 12 May 2014 | TBC | | |
| 21. | 23 June 2014 | TBC | | |

Central Bedfordshire Council Forward Plan of Key Decisions 1 September 2013 to 31 August 2014

- 1) During the period from **1 September 2013 to 31 August 2014**, Central Bedfordshire Council plans to make key decisions on the issues set out below. “Key decisions” relate to those decisions of the Executive which are likely:
 - to result in the incurring of expenditure which is, or the making of savings which are, significant (namely £200,000 or above per annum) having regard to the budget for the service or function to which the decision relates; or
 - to be significant in terms of their effects on communities living or working in an area comprising one or more wards in the area of Central Bedfordshire.
- 2) The Forward Plan is a general guide to the key decisions to be determined by the Executive and will be updated on a monthly basis. Key decisions will be taken by the Executive as a whole. The Members of the Executive are:

| | |
|----------------------------|--|
| Cllr James Jamieson | Leader of the Council and Chairman of the Executive |
| Cllr Maurice Jones | Deputy Leader and Executive Member for Corporate Resources |
| Cllr Mark Versallion | Executive Member for Children’s Services |
| Cllr Mrs Carole Hegley | Executive Member for Social Care, Health and Housing |
| Cllr Nigel Young | Executive Member for Sustainable Communities – Strategic Planning and Economic Development |
| Cllr Brian Spurr | Executive Member for Sustainable Communities - Services |
| Cllr Mrs Tricia Turner MBE | Executive Member for Partnerships |
| Cllr Richard Stay | Executive Member for External Affairs |
- 3) Whilst the majority of the Executive’s business at the meetings listed in this Forward Plan will be open to the public and media organisations to attend, there will inevitably be some business to be considered that contains, for example, confidential, commercially sensitive or personal information.

This is a formal notice under the Local Authorities (Executive Arrangements)(Meetings and Access to Information)(England) Regulations 2012 that part of the Executive meeting listed in this Forward Plan will be held in private because the agenda and reports for the meeting will contain exempt information under Part 1 of Schedule 12A to the Local Government Act 1972 (as amended) and that the public interest in withholding the information outweighs the public interest in disclosing it.

- 4) Those items identified for decision more than one month in advance may change in forthcoming Plans. Each new Plan supersedes the previous Plan. Any person who wishes to make representations to the Executive about the matter in respect of which the decision is to be made should do so to the officer whose telephone number and e-mail address are shown in the Forward Plan. Any correspondence should be sent to the contact officer at the relevant address as shown below. General questions about the Plan such as specific dates, should be addressed to the Committee Services Manager, Priory House, Monks Walk, Chicksands, Shefford SG17 5TQ.
- 5) The agendas for meetings of the Executive will be published as follows:

| Meeting Date | Publication of Agenda |
|-------------------|-----------------------|
| 14 May 2013 | 2 May 2013 |
| 25 June 2013 | 13 June 2013 |
| 13 August 2013 | 1 August 2013 |
| 24 September 2013 | 12 September 2013 |
| 5 November 2013 | 24 October 2013 |
| 10 December 2013 | 28 November 2013 |
| 14 January 2014 | 02 January 2014 |
| 4 February 2014 | 23 January 2014 |
| 18 March 2014 | 6 March 2014 |
| 22 April 2014 | 10 April 2014 |
| 27 May 2014 | 15 May 2014 |

Central Bedfordshire Council

Forward Plan of Key Decisions for the period 1 September 2013 to 31 August 2014

Key Decisions

Date of Publication: 01.08.13

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|--|-----------------------------------|--|
| 1. | Framework Agreement for Care Homes With and Without Nursing in Central Bedfordshire - | To ask the Executive to: - authorise the arrangements for entering into the Framework Agreement for care homes within Central Bedfordshire which was approved on 6 November 2012; - approve the successful providers to be accepted onto the Framework Agreement (if available); and - agree the approach to ensuring the quality of care homes by implementing the new Quality Monitoring System in conjunction with the Framework Agreement. | 24 September 2013 | Care home providers at the meeting of the Provider Forum in December 2012 and the special meeting of care home providers on 28 May 2013. | Report | Executive Member for Social Care, Health and Housing Comments by 23/08/13 to Contact Officer: Elizabeth Saunders, Assistant Director Commissioning Email: elizabeth.saunders@centralbedfordshire.gov.uk Tel: 0300 300 6494 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|----------------------------|-----------------------------------|---|
| 2. | Planning Enforcement Plan - | To adopt the Planning Enforcement Plan. | 24 September 2013 | | Planning Enforcement Plan | Executive Member for Sustainable Communities - Strategic Planning and Economic Development Comments by 23/08/13 to Contact Officer: Sue Cawthra, Enforcement & Appeals Team Leader Email: sue.cawthra@centralbedfordshire.gov.uk Tel: 0300 300 4369 |
| 3. | Community Infrastructure Levy - | To approve the consultation and subsequent Submission of the Community Infrastructure Levy draft charging schedule. | 24 September 2013 | | Report | Executive Member for Sustainable Communities - Strategic Planning and Economic Development Comments by 23/08/13 to Contact Officer: Jonathan Baldwin, Senior Planning Officer Email: jonathan.baldwin@centralbedfordshire.gov.uk Tel: 0300 300 5510 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|--|-------------------------|--|---|--|
| 4. | Leisure Strategy - | To adopt the Leisure Strategy: Chapter 4: Physical Activity Strategy. | 24 September 2013 | All Member Presentation of Draft Strategy on 10 July 2013. Draft Strategy to Sustainable Communities Overview and Scrutiny Committee on 25 July 2013. Draft Strategies to Sustainable Communities Overview and Scrutiny Committee on 5 September 2013. | Chapter 4, Physical Activity Strategy | Executive Member for Sustainable Communities - Services Comments by 23/08/13 to Contact Officer: Jill Dickinson, Head of Leisure Services Email: jill.dickinson@centralbedfordshire.gov.uk Tel: 0300 300 4258 |
| 5. | Revenue, Capital and Housing Revenue Account (HRA) Quarter 1 Budget Monitor Reports - | To consider the revenue, capital and HRA quarter 1 budget monitoring report. | 24 September 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 23/08/13 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 6. | School Funding Reform - | To consider the School Funding Reform: 2014/15 Revenue Funding Arrangements. | 24 September 2013 | In conjunction with the Schools Forum all schools in Central Bedfordshire will be consulted on any changes to schools funding. Date and method to be agreed shortly. | DfE - School Funding Reform: Findings from the Review of 2013/14 Arrangements and Changes for 2014/15 DfE - 2014/15 Revenue Funding Arrangements | Executive Member for Children's Services Comments by 23/08/13 to Contact Officer: Dawn Hill, Senior Finance Manager - Children's Services Email: dawn.hill@centralbedfordshire.gov.uk Tel: 0300 300 6269 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|--|-------------------------|--|---|--|
| 7. | Green Garden Waste - | To approve spend relating to the procurement of treatment and disposal services for green garden waste collected within Central Bedfordshire. | 24 September 2013 | | Report | Executive Member for Sustainable Communities - Services Comments by 23/08/13 to Contact Officer: Tracey Harris (Waste), Head of Waste Services Email: tracey.harris2@centralbedfordshire.gov.uk Tel: 0300 300 4646 |
| 8. | Central Bedfordshire Next Generation Network - | To provide the Executive with an understanding of the proposed changes to the supply contract for the provision of school and corporate data network services and telephony solutions. | 24 September 2013 | | Proposal Document | Deputy Leader and Executive Member for Corporate Resources Comments by 23/08/13 to Contact Officer: Deb Clarke, Director of Improvement and Corporate Services Email: deb.clarke@centralbedfordshire.gov.uk Tel: 0300 300 6651 |
| 9. | Award of Preferred Bidder status to the selected contractor under the BEaR Project - | The report will be seeking the Executive to endorse the selection of the preferred bidder made by the BEaR Project Board to allow the Project Team to finalise and award the Contract. | 8 October 2013 | Consultees and dates to be confirmed, however this item will go through Overview and Scrutiny at the beginning of September. | A full report and presentation will be provided alongside the Executive report. | Executive Member for Sustainable Communities - Services Comments by 07/09/13 to Contact Officer: Ben Finlayson, BEaR Project Manager Email: ben.finlayson@centralbedfordshire.gov.uk Tel: 0300 300 6277 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|--|---|--|
| 10. | Award of Responsive and Programmed Electrical Maintenance Contract 2014 to 2017 to Council Housing Properties - | To award the Contract to the preferred contractor for this service. | 5 November 2013 | | Report with exempt appendices | Executive Member for Social Care, Health and Housing Comments by 04/10/13 to Contact Officer: Basil Quinn, Housing Asset Manager Performance or Peter Joslin, Housing Asset Manager Email: basil.quinn@centralbedfordshire.gov.uk Tel: 0300 300 5118 or peter.joslin@centralbedfordshire.gov.uk Tel: 0300 300 5395 |
| 11. | Flitwick Leisure Centre Feasibility Study - | To consider the Flitwick Leisure Centre Feasibility Study. | 5 November 2013 | Members, local community and key stakeholders. | Flitwick Leisure Centre Feasibility Study | Executive Member for Sustainable Communities - Services Comments by 04/10/13 to Contact Officer: Jill Dickinson, Head of Leisure Services Email: jill.dickinson@centralbedfordshire.gov.uk Tel: 0300 300 4258 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|---|-----------------------------------|--|
| 12. | Admissions Arrangements and Co-ordinated Scheme 2015/16 - | To approve commencement of consultation on the Council's Admissions Arrangements and co-ordinated scheme for the academic year 2015/16. | 5 November 2013 | <p>a) Governing bodies of Local Authority schools.</p> <p>b) All other admission authorities within the relevant area.</p> <p>c) Parents of children between the ages of two and eighteen.</p> <p>d) Other persons in the relevant area who have an interest in the proposed admissions.</p> <p>e) Adjoining neighbouring authorities.</p> <p>f) The Church of England and Catholic Diocese.</p> <p>Method of consultation: Website. In addition: Letter to a, b, e and f. Information distributed to academies/schools and nurseries, notice in the local media to consult with c and d.</p> | Report | <p>Executive Member for Children's Services</p> <p>Comments by 04/10/13 to Contact Officer:</p> <p>Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning)</p> <p>Email: pete.dudley@centralbedfordshire.gov.uk</p> <p>Tel: 0300 300 4203</p> |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|---|-------------------------|--|--|---|
| 13. | Dukeminster Extra Care Housing Scheme, Dunstable - | To seek Executive approval to award the build contract. | 5 November 2013 | Consultation with stakeholder groups (such as the Older Peoples Reference Group and Sheltered Tenants Action Group) previously undertaken as part of initial scheme proposals presented to the Executive on 5 February 2013. Further consultation with these stakeholders, relevant technical officers and Heads of Service continuing as part of the detailed design phase. | Report - may contain exempt appendices | Executive Member for Social Care, Health and Housing Comments by 04/10/13 to Contact Officer: Bernard Carter, Client Manager, Extra Care Expansion Project Email: bernard.carter@centralbedfordshire.gov.uk Tel: 0300 300 4175 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|---|-----------------------------------|--|
| 14. | Arlesey Nursery School and Childcare Centre - | To seek approval to commence statutory consultation and to publish statutory notices on the proposal to close Arlesey Nursery School and Childcare Centre to enable it to merge with Gothic Mede Academy with effect from September 2014. | 5 November 2013 | Statutory consultation between 11 November and 20 December 2013. Representation period to a statutory notice between 13 January and 28 February 2014. Method of consultation: Consultation documents, school and Academy website, notices in local press, public meetings with: Teachers and other staff at the school and Academy Unions. Families of children at the school. Local Schools in the area. Central Bedfordshire Council. Church of England Diocese. Constituency MP. Arlesey Town Council. | Report | Executive Member for Children's Services Comments by 04/10/13 to Contact Officer: Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning) Email: pete.dudley@centralbedfordshire.gov.uk Tel: 0300 300 4203 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|--|-------------------------|---|-----------------------------------|--|
| 15. | Central Bedfordshire Council's Equality Strategy - | To approve the Council's Equality Strategy which sets out the Council's vision and approach to ensuring all sections of the community get high quality services appropriate to their needs and also sets out how the Council will meet its legal responsibilities to ensure consideration of equality is integrated in to its service planning, delivery and human resource systems. | 5 November 2013 | Public Consultation, Equality Forum and Overview and Scrutiny Committees. | Draft Equality Strategy 2013-16 | Deputy Leader and Executive Member for Corporate Resources Comments by 04/10/13 to Contact Officer: Clare Harding, Corporate Policy Advisor (Equality & Diversity) Email: clare.harding@centralbedfordshire.gov.uk Tel: 0300 300 6109 |
| 16. | Land East of Biggleswade Phase 4 - | To consider land East of Biggleswade Phase 4. | 5 November 2013 | | Report - Exempt | Deputy Leader and Executive Member for Corporate Resources Comments by 04/10/13 to Contact Officer: Nick Kealey, Head of Property Assets Email: nick.kealey@centralbedfordshire.gov.uk Tel: 0300 300 5769 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|--|-------------------------|---|-----------------------------------|---|
| 17. | Joint Venture Proposal - | To receive a report on the proposals for joint ventures. | 10 December 2013 | Overview and Scrutiny Committee on 22 October 2013. | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 09/11/13 to Contact Officer: Nick Kealey, Head of Property Assets Email: nick.kealey@centralbedfordshire.gov.uk Tel: 0330 300 5769 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|--|------------------------------------|---|
| 18. | Proposals for Commissioning of New School Places for Implementation in September 2015 and Proposals for Commissioning of New School Places for Implementation in September 2016 - | 1) Determination of proposals for commissioning of new school places for implementation in September 2015; and 2) to approve commencement of consultations for proposals for commissioning of new school places for implementation in September 2016. | 10 December 2013 | <p>For proposals for New School Places for implementation in September 2015:</p> <ul style="list-style-type: none"> • the governing body of the schools which are the subject of proposals; • families of pupils, teachers and other staff at the schools; • the governing bodies, teachers and other staff of any other school that may be affected; • families of any pupils at any other school who may be affected by the proposals including families of pupils at feeder schools; • trade unions who represent staff at the schools and representatives of trade unions of any other staff at schools who may be affected by the proposals; • Constituency MPs for the schools that are the subject of the proposals; • the local parish council where the school that is the subject of the proposals is situated <p>Consultation period between May and November 2013 including press releases, public meetings, statutory notices.</p> | Report and Outcome of Consultation | <p>Executive Member for Children's Services Comments by 09/11/13 to Contact Officer: Rob Parsons, Head of School Organisation and Capital Planning Email: rob.parsons@centralbedfordshire.gov.uk Tel: 0300 300 5572</p> |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|----------------------------|-----------------------------------|--|
| 19. | Draft Capital Programme - 2014/15 to 2017/18 - | To consider the draft Capital Programme for 2014/15 to 2017/18. | 10 December 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 09/11/13 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 20. | Draft Revenue Budget and Fees and Charges 2014/15 - | To consider the draft revenue budget for 2014/15, including the draft fees and charges. | 10 December 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 09/11/13 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|----------------------------|-----------------------------------|--|
| 21. | Draft Housing Revenue Account Budget and Business Plan 2014/15 - | To consider the draft Housing Revenue Account Budget and Business Plan 2014/15. | 10 December 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources, Executive Member for Social Care, Health and Housing Comments by 09/11/13 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 22. | Revenue, Capital and Housing Revenue Account (HRA) Quarter 2 Budget Monitor Reports - | To consider the revenue, capital and HRA quarter 2 budget monitoring report. | 10 December 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 09/11/13 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|---|-------------------------|---|---|---|
| 23. | Determination of the Statutory Proposal of the Governing Body of Pulford CoE VA Lower School, Leighton Buzzard - | Determination of the statutory proposal of the Governing Body of Pulford Church of England Voluntary Aided Lower School, Pulford Road, Leighton Buzzard, to enlarge the permanent capacity of the school from 150 places to 225 places with effect from September 2014. | 10 December 2013 | <p>Statutory consultation between 13 May and 17 June 2013. Representation period to a statutory notice between 19 September and 17 October 2013. Method of Consultation: Consultation documents, school website, notices in local press, public meetings with:</p> <ul style="list-style-type: none"> • Teachers and other staff at the school • Unions • Families of children at the school • Local Schools in the area of Central Bedfordshire Council • The Pulford Trust • Church of England Diocese • Constituency MP • Leighton Buzzard Town Council. | Report and the report of the Governing Body. Consultation documents produced, statutory notices served, representations received. | Executive Member for Children's Services Comments by 09/11/13 to Contact Officer: Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning) Email: pete.dudley@centralbedfordshire.gov.uk Tel: 0300 300 4203 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|--|-------------------------|---|--|--|
| 24. | Central Bedfordshire's Flood and Water Management Act 2010 Duties - | To approve a local flood risk strategy for Central Bedfordshire and to create a Sustainable Urban Drainage Approval Board. | 14 January 2014 | <p>CBC is required under the Flood and Water Management Act 2010 to produce a Local Flood Risk Management Strategy. The draft strategy will be subject to public consultation. Sustainable Communities Overview and Scrutiny Committee will consider the draft strategy and the public consultation response to the strategy in August/September 2013.</p> <p>Following Department for Environment, Food and Rural Affairs confirmation of the mandatory sustainable drainage application processes, CBC will also be required to establish a SUDS Approval Board to evaluate, approve and adopt suitable SUDS measures for all new developments.</p> | Summary of Flood and Water Management Act Draft Local Flood Risk Management Strategy | <p>Executive Member for Sustainable Communities - Services Comments by 13/12/13 to Contact Officer: Iain Finnigan, Senior Engineer - Policy and Flood Risk Management Email: iain.finnigan@centralbedfordshire.gov.uk Tel: 0300 300 4351</p> |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|---|---|--|
| 25. | Consultation on School Funding 2013 - | To formally discuss and approve the Council's proposed school funding formula following consultation in September 2013. This formula will determine the funding basis for schools and academies in Central Bedfordshire Council area for April 2014/15. | 14 January 2014 | | Report | Executive Member for Children's Services Comments by 13/12/13 to Contact Officer: Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning) Email: pete.dudley@centralbedfordshire.gov.uk Tel: 0300 300 4203 |
| 26. | Leisure Strategy - | To adopt Leisure Strategy: Chapter 2 - Recreation & Open Space Strategy, Chapter 3 - Playing Pitch Strategy, Overarching Leisure Strategy. | 18 March 2014 | Draft strategies to Sustainable Communities Overview and Scrutiny Committee on 23 January 2014. | Chapter 2: Recreation & Open Space Strategy Chapter 3: Playing Pitch Strategy Overarching Leisure Strategy Document | Executive Member for Sustainable Communities - Services Comments by 17/02/14 to Contact Officer: Jill Dickinson, Head of Leisure Services Email: jill.dickinson@centralbedfordshire.gov.uk Tel: 0300 300 4258 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|---|-------------------------|----------------------------|-----------------------------------|--|
| 27. | Revenue, Capital and Housing Revenue Account (HRA) Quarter 3 Budget Monitoring Reports - | To consider the revenue, capital and HRA quarter 3 budget monitoring report. | 18 March 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 17/03/14 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 28. | Admission Arrangements and Co-ordinated Scheme 2014/15 - | Determination of the Council's Admissions Arrangements and co-ordinated scheme for the academic year 2014/15. | 18 March 2014 | | Report | Executive Member for Children's Services Comments by 17/02/14 to Contact Officer: Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning) Email: pete.dudley@centralbedfordshire.gov.uk Tel: 0300 300 4203 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|--|-------------------------|--|---|---|
| 29. | Arlesey Nursery School and Childcare Centre - | Determination of the statutory proposal to close Arlesey Nursery School and Childcare Centre to enable it to merge with Gothic Mede Academy with effect from September 2014. | 22 April 2014 | <p>Statutory consultation between 11 November and 20 December 2013.</p> <p>Representation period to a statutory notice between 13 January and 28 February 2014.</p> <p>Method of consultation: Consultation documents, school and Academy website, notices in local press, public meetings with: Teachers and other staff at the school and Academy Unions. Families of children at the school. Local Schools in the area. Central Bedfordshire Council. Church of England Diocese. Constituency MP. Arlesey Town Council.</p> | Report Consultation documents produced, statutory notices served, representations received. | <p>Executive Member for Children's Services</p> <p>Comments by 21/03/14 to Contact Officer: Pete Dudley, Assistant Director Children's Services (Learning & Strategic Commissioning)</p> <p>Email: pete.dudley@centralbedfordshire.gov.uk</p> <p>Tel: 0300 300 4203</p> |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|--------------------------|---|---|-------------------------|---|--|--|
| NON KEY DECISIONS | | | | | | |
| 30. | Minerals and Waste Core Strategy - | To recommend to Council the adoption of the Minerals and Waste Core Strategy. | 24 September 2013 | A wide range of stakeholders were involved in consultations undertaken from 2006 to 2012, using methods which include an internet portal, deposit of hard copies at points of presence, and displaying the Core Strategy on the Council website. Consultees included the Parish Councils, statutory bodies, special interest groups, minerals industry, waste management industry, and individuals who had expressed an interest at previous consultations. | Minerals and Waste Core Strategy and the Inspector's report following the Examination in public. | Executive Member for Sustainable Communities - Strategic Planning and Economic Development Comments by 23/08/13 to Contact Officer: Roy Romans, Minerals and Waste Team Leader Email: roy.romans@centralbedfordshire.gov.uk Tel: 0300 300 6039 |
| 31. | Quarter 1 Performance Report - | To consider the quarter 1 performance report. | 24 September 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 23/08/13 to Contact Officer: Elaine Malarky, Head of Programmes & Performance Management Email: elaine.malarky@centralbedfordshire.gov.uk Tel: 0300 300 5517 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|--|--|-------------------------|----------------------------|-----------------------------------|---|
| 32. | Quarter 2 Performance Report - | To consider the quarter 2 performance report. | 10 December 2013 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 09/11/13 to Contact Officer: Elaine Malarky, Head of Programmes & Performance Management Email: elaine.malarky@centralbedfordshire.gov.uk Tel: 0300 300 5517 |
| 33. | Capital Programme - 2014/15 to 2017/18 - | To recommend to Council the proposed Capital Programme for 2014/15 to 2017/18 for approval. | 4 February 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 03/01/14 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 34. | Treasury Management Strategy Statement and Investment Strategy 2014-2018 - | To recommend to Council the Treasury Management Strategy Statement and Investment Strategy 2014-2018 for approval. | 4 February 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 03/01/14 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|--|-------------------------|---|---|--|
| 35. | Revenue Budget and Medium Term Financial Plan 2014/15 - 2017/18 - | To recommend to Council the Revenue Budget and Medium Term Financial, including the fees and charges, Plan 2014/15 - 2017/18 for approval. | 4 February 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 03/01/14 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 36. | Housing Revenue Account Budget and Business Plan 2014/15 - | To recommend to Council the Housing Revenue Account Budget and Business Plan 2014/15 for approval. | 4 February 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources, Executive Member for Social Care, Health and Housing Comments by 03/01/14 to Contact Officer: Charles Warboys, Chief Finance Officer Email: charles.warboys@centralbedfordshire.gov.uk Tel: 0300 300 6147 |
| 37. | Community Safety Partnership Plan and Priorities - | To recommend to Council to approve the Community Safety Partnership Plan and Priorities for 2014 - 2015. | 18 March 2014 | Strategic Assessment & Partnership Plan will be considered by the Community Safety Partnership Executive, the relevant Overview and Scrutiny Committee and the Local Strategic Partnership. | Strategic Assessment Priorities & Community Safety Partnership Plan 2014 - 2015 | Executive Member for Sustainable Communities - Services Comments by 17/02/14 to Contact Officer: Joy Craven, CSP Manager Email: joy.craven@centralbedfordshire.gov.uk Tel: 0300 300 4649 |

| Ref No. | Issue for Key Decision by the Executive | Intended Decision | Indicative Meeting Date | Consultees and Date/Method | Documents which may be considered | Portfolio Holder and Contact officer (method of comment and closing date) |
|---------|---|---|-------------------------|----------------------------|-----------------------------------|---|
| 38. | Quarter 3 Performance Report - | To consider the quarter 3 performance report. | 18 March 2014 | | Report | Deputy Leader and Executive Member for Corporate Resources Comments by 17/02/14 to Contact Officer: Elaine Malarky, Head of Programmes & Performance Management Email: elaine.malarky@centralbedfordshire.gov.uk Tel: 0300 300 5517 |

Postal address for Contact Officers: Central Bedfordshire Council, Priory House, Monks Walk, Chicksands, Shefford SG17 5TQ

**Central Bedfordshire Council
Forward Plan of Decisions on Key Issues**

For the Municipal Year 2012/13 the Forward Plan will be published on the thirtieth day of each month or, where the thirtieth day is not a working day, the working day immediately proceeding the thirtieth day, or in February 2013 when the plan will be published on the twenty-eighth day:

| Date of Publication | Period of Plan |
|----------------------------|------------------------------------|
| 02.04.13 | 1 May 2013 – 30 April 2014 |
| 01.05.13 | 1 June 2013 – 31 May 2014 |
| 31.05.13 | 1 July 2013 – 30 June 2014 |
| 02.07.13 | 1 August 2013 – 31 July 2014 |
| 01.08.13 | 1 September 2013 – 31 August 2014 |
| 30.08.13 | 1 October 2013 – 30 September 2014 |
| 02.10.13 | 1 November 2013 – 31 October 2014 |
| 31.10.13 | 1 December 2013 – 30 November 2014 |
| 28.11.13 | 1 January 2014 – 31 December 2014 |
| 02.01.14 | 1 February 2014 – 31 January 2015 |
| 30.01.14 | 1 March 2014 – 28 February 2015 |
| 28.02.14 | 1 April 2014 – 31 March 2015 |

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