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

This meeting may be filmed.*



please ask for Paula Everitt

direct line 0300 300 4196 date 14 January 2016

NOTICE OF MEETING

SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE

Date & Time Monday, 25 January 2016 10.00 a.m.

Venue at

Watling House, Dunstable

Richard Carr

Chief Executive

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

Cllrs P Hollick (Chairman), P Downing (Vice-Chairman), R D Berry, N B Costin, P A Duckett, C C Gomm, Mrs S A Goodchild, Mrs D B Gurney and G Perham

[Named Substitutes:

Mrs A Barker, K Ferguson, Ms A M W Graham, B Saunders and T Stock]

All other Members of the Council - on request

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

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AGENDA

1. 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 14 December 2015 and to note actions taken since that meeting.

2. Apologies for Absence

Apologies for absence and notification of substitute members

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.

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.

9. Executive Member Update

To receive a brief verbal update from the Executive Member for Social Care, Health and Housing.

Part B: Social Care and Housing

To consider matters relating to adult social care and housing services and any other matters that fall within the remit of the Social Care, Health and Housing Directorate.

Reports

Item Subject Page Nos.

10 The Future of Greenacre Older Persons Home: Outcome of Consultation and Recommendations

To Follow

To scrutinise the report and results of the consultation on the future of Greenacre Older Persons home and to provide the Executive with recommendations on the proposals for its future.

11 Draft Budget & MTFP, Capital Programme and HRA 2016/17

* 13 - 24

To consider the draft Budget, updated Medium Term Financial Plan, Capital Programme and HRA pertaining to the Social Care Health and Housing Directorate only. Information that is relevant to the other directorates will be considered in the other relevant OSC meetings. Members are requested to submit their comments, observations and recommendations in respect of the Executive's proposals with particular reference to the Social Care Health and Housing Directorate proposals, to the meeting of the Executive on 09 February 2016.

Members are requested to bring their copies of the Executive report with them to the meeting (hard copies will not be provided). The report is available at the following website:-

http://centralbeds.moderngov.co.uk/ieListDocuments.aspx ?CId=577&MId=4921&Ver=4

12 **Q2 2015/16 Performance Report**

* 25 - 40

To provide comment and challenge to the Q2 2015/16 performance monitoring information.

Part A: Health Scrutiny

to consider matters relating to health of adults, children and young people and 'substantial' changes to NHS provision in Central Bedfordshire.

| | | Reports | | |
|------|---|--|----|-----------|
| Item | Subject | | Pa | ge Nos. |
| 13 | The purpos with an upo the Bedford | silience Exception Report te of the attached report is to provide Members late on the Winter Resilience Plan produced by dishire Clinical Commissioning Group (BCCG) tise the exceptions reported. | * | To Follow |
| 14 | The purpose with an upo Wellbeing Service Foundation and comme implements | tal Health Services Update see of the attached report is to provide Members late on the Bedfordshire Mental Health and Service provided by the East London Trust. The Committee is asked to consider ent on the progress that has been made on the ation of the ELFT plan, the key achievements 2015 and the future focus. | * | 41 - 56 |
| 15 | Work Prog | ramme 2015/16 and Executive Forward Plan | * | 57 - 62 |
| | • | provides Members with details of the currently nittee work programme and the latest Executive | | |

Forward Plan.



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, 14 December 2015.

PRESENT

Cllr P Hollick (Chairman)
Cllr P Downing (Vice-Chairman)

Cllrs N B Costin Cllrs Mrs S A Goodchild P A Duckett Mrs D B Gurney C C Gomm

Apologies for Absence: Cllrs R D Berry

G Perham

Members in Attendance: Cllrs C Hegley Executive Member for Social Care

and Housing

J G Jamieson Leader of the Council and Chairman

of the Executive

M R Jones Executive Member for Health

Officers in Attendance: Mrs P Everitt – Scrutiny Policy Adviser

Mr T Keaveney – Assistant Director Housing

Services

Mrs J Moakes – Head of Strategic Commissioning
Mr N Murley – Assistant Director Resources
Mrs J Ogley – Director of Social Care, Health and

Housing

Others in Attendance Mrs M Bradley Head of Mental Health and Wellbeing.

Bedfordshire CCG

Ms J Meggitt Director of Communications &

Engagement

Mr A Moore Chief Operating Officer, Bedfordshire

Clinical Commissioning Group

Mr R Smith Chairman Central Bedfordshire

Healthwatch

Mr M Tait Chief Accountable Officer

SCHH/15/47. Minutes

RESOLVED that the Minutes of the meeting of the Social Care Health and Housing Overview and Scrutiny Committee held on 26 October 2015 be confirmed and signed by the Chairman as a correct record.

SCHH/15/48. Members' Interests

None.

SCHH/15/49. Chairman's Announcements and Communications

The Chairman welcomed Cllr Paul Downing as the newly appointment Vice-chairman of the Committee. Cllr Ghent was thanked for his work as the past vice-chairman and was wished well as the new Deputy Executive Member for Adult Social Care. In light of these changes a position had become available on the Joint Health Overview and Scrutiny and it was agreed that Cllr Downing be appointed.

SCHH/15/50. Petitions

None.

SCHH/15/51. Questions, Statements or Deputations

The Chairman invited a Member of the Public to speak on the Greenacre Care Home consultation. The speaker raised concerns about the process to access the financial credibility of the owners of care homes where the council was seeking to secure accommodation. In response the Executive Member for Social Care and Housing agreed to a meeting with the member of the public to discuss the concerns and the information provided to the Executive and Overview and Scrutiny Members.

SCHH/15/52. Call-In

None.

SCHH/15/53. Requested Items

None.

SCHH/15/54. Executive Members Update

The Executive Member for Social Care and Housing advised the Committee of her attendance at the Social Care Health and Housing staff awards. There had been a number of challenging events that staff had been recognised for. Members were advised that the Council had been complimented on a recent visit by the Care Quality Commission. The Committee were also advised that details of a budget drop-in session would be circulated to Members of the Committee to meet the Executive Member and officers to raise any budget concerns or questions.

The Executive Member for Health welcomed Matthew Tait to the meeting, the newly appointed Chief Accountable Officer at the Bedfordshire Clinical Commissioning Group. Members were advised of the positive and speedy changes implemented by The East London Foundation Trust for Mental Health Services. In addition, steps to improve the Health and Wellbeing Board's ways of working were underway.

SCHH/15/55. Bedfordshire Clinical Commissioning Group - Detailed Budget Report

Matthew Tait, The Chief Accountable Officer at the BCCG introduced a report that outlined the Quality, Innovation, Productivity and Prevention programme (QIPP). Members were advised that the new robust financial procedures implemented by the BCCG would deliver planned activity and savings as a result of new contracts, such as Mental Health. Additional money to support the winter resilience period was required, despite the current mild conditions. Andrew Moore, Interim Chief Operating Officer also advised Members that the QIPP programme set out to improve efficiency and had a detailed governance process that ensured selected schemes were delivered.

The areas of efficiency were outlined in the report and Members of the Committee raised the following queries:-

- Concern that the switch from branded drugs to cheaper equivalents would have a negative affect on some patients. The Interim Chief Operating Officer advised GPs would decide which drug to prescribe in full consultation with patients.
- How the funding was allocated to those GP surgeries that crossed county boarders. Members were advised that funding was given to each locality hub and was not distributed by post code.
- The plans BCCG had in place for Biggleswade Hospital in light of its review of estates and property. The Chief Accountable Officer advised that NHS Property Services owned Biggleswade Hospital and it would be used if required over the winter period. The Executive Member advised early discussions had taken place to use the facility and the Committee would be updated at a future meeting.
- What impact the changes to the IVF Service had on the number of service users. The Interim Chief Operating Officer advised there had been no change.
- The effect the changes at the Luton and Dunstable Hospital would have on the BCCG. In response, the Chief Accountable Officer acknowledged there would be major challenges and patient needs would be carefully monitored.

RECOMMENDED

- 1. That the new focus and the actions taken to keep to the budget be recognised; that further budget reports be given to future Scrutiny Committees.
- 2. That it be ensured the Quality, Improvement, Productivity and Prevention Savings (QIPPs) produce the savings expected.

SCHH/15/56. The Mental Health Crisis Care Concordat

The BCCG's Assistant Director of Mental Health and Wellbeing presented a report that outlined the progress with partners to develop and deliver services. A street triage service business case had been developed and approved in addition to improvements to facilities at Bedford Hospital's Weller Wing and additional units for patients in Luton. A dedicated Mental Health practitioner role had also been created to support and coordinate services in Central Bedfordshire and Bedford.

In light of the report, Members queried the following:-

- The importance of a clear pathway for GPs wishing to make a referral. The Assistant Director confirmed GPs had the correct details and advised that Mental Health nurses were available at surgeries.
- Whether a supply of safe housing was available to those patients who were aware they were in crisis and needed an access point and somewhere safe to stay. The Assistant Director advised that housing supply nationally and locally was a challenge, however, the council made the best use of its stock to help adults at risk.

The active involvement of the Police in the training provided, which was not presently available for Magistrates or the Probation Service, although this would be investigated.

RECOMMENDED

1. That the Committee recognises the need to further promote services for mental health and ensure that individuals receive timely and constructive intervention and that the Concordat provide the means to achieve this.

That Magistrates and Probation Services be included in mental health services training.

SCHH/15/57. The Commissioning & Award of Adult Social Care Services and Associated Contracts

The Head of Commissioning introduced a report that set out commissioning activities for the Voluntary and Community Sector and Housing Support Services that supported vulnerable adults and individual wellbeing. The Committee's comments were sought on the approach to refocus on funding and that some contracts had been extended to allow time to look in depth at finances and engage with staff and partners.

In light of the report a Member raised a concern about information, advice and signposting for service users. The Head of Commissioning advised that Advice Central had been set up to link people to services. Each provider would be required to sign up to Advice Central to make it easier for residents to get to the right organisation.

A Member asked how 'success' was measured for these activities. The Head of Commissioning advised it was a challenge to measure and officers were looking at high level outcomes and would focus on the numbers and what the services meant to people. The Director explained that further work to develop the schemes was required in addition to changes to voluntary working.

RECOMMENDED

- 1. That the Committee acknowledge the need for more time and to extend current contracts to enable outcome based commissioning with stakeholders and the realignment of contracts in particular along-side Council budgets.
- 2. That the preventative nature of the services be applauded by the Committee.

SCHH/15/58. Customer Relations Annual Report 2013/14

The Assistant Director Resources introduced the Customer Relations Annual Report 2013/14 that enabled the Council to review important customer feedback and identify how practices might be improved. In light of the report a Member queried why it had taken 9 months for the report to come to Committee. In response the Director advised it was a matter of capacity and efforts would be made to bring the report to Committee sooner next year. A wish to increase the number of complaints and compliments received and changes to the process to make it easier to make a comment would be reviewed.

RECOMMENDED

- 1. That the reduction in complaints and those settled by local resolution with the intent to learn from these complaints be noted.
- 2. That the compliments received be welcomed.
- 3. That the importance of good interpersonal relationships with clients by services for older people be stressed.

SCHH/15/59. Q2 Budget Monitoring Report

The Assistant Director Resources introduced the Q2 budget monitoring report and drew attention to the current forecast revenue outturn for Social Care Health and Housing, which was £0.958m overspent. The Executive Member advised that the that a lot of work to address the overspend had been undertaken but it was still proving to be a challenge. The service was in a strong position in relation to welfare reforms and additional time spent on the development of Priory View would ensure older people had a first class facility.

The Public Health Q2 budget monitoring report advised of a balanced budget following a proposed transfer to earmarked reserves of £46k to a total reserve of £1,542k. There had been a lower take up of the Sexual Health service that had provided a £100k underspend. In light of a request from a Member the Head of Public Health agreed to provide an update on the purpose of the £46k earmarked reserve.

RECOMMENDED that the reasoning behind the £1m overspend be noted and that the service be encouraged to come in on target.

SCHH/15/60. 5 Year Plan Performance Monitoring

The Leader of the Council delivered a presentation that outlined the 5 Year Plan key priorities agreed by Members. Views were specifically sought on key performance metrics for Social Care Health and Housing that would open into Key Performance Indicators, targets and milestones. In the first instance a lead metric had been proposed and the Leader welcomed feedback on these or suggestions to improve them.

Members discussed the following points in detail:-

 The importance of communities coming together to solve problems and the need for a mechanism to be put in place to share good practice.

- The importance of planning and providing a mix of generational housing in communities. To achieve this, the Council must promote the idea of older residents moving to smaller homes to provide access to family homes.
- That importance of local communities embracing community safety and crime reduction, which was the responsibility of a range of organisations.

RECOMMENDED

- 1. That the approach to the Five Year Plan be welcomed and that the approach to prevention rather than cure be applauded.
- 2. That exceptional performance be highlighted in blue in future performance score cards.

SCHH/15/61. Work Programme 2015/16 and Executive Forward Plan

The Committee considered the current work programme and were advised of additions that included:-

- January Winter Resilience (report by exception BCCG)
- January/March EFLT update on Mental Service provision
- March Winter Resilience, BCCG.

RECOMMENDED that subject to the addition of those items noted in the Minutes, the work programme be approved.

(Note: The meeting commenced at 10.00 a.m. and concluded at 1.12 p.m.)

Central Bedfordshire Council

SOCIAL CARE, HEALTH & HOUSING OVERVIEW AND SCRUTINY COMMITTEE

25 January 2016

Draft Budget 2016/17 and Medium Term Financial Plan

Report of Cllr Richard Wenham, Executive Member for Corporate Resources (cllr.richard.wenham@centralbedfordshire.gov.uk)

Advising Officers: Charles Warboys, Chief Finance Officer (charles.warboys@centralbedfordshire.gov.uk)

This report relates to a non-Key Decision

Purpose of this report

- 1. The report allows Members the opportunity to review the Council's draft Budget for 2016/17 and Medium Term Financial Plan, which was presented to Executive on 12 January 2016.
- 2. The report proposes the draft Budget for 2016/17 and updates the Medium Term Financial Plan (MTFP) approved by Council in February 2015. The Financial Settlement for local government was released on 17 December 2015.
- 3. The announcement covers many complex areas of funding and in the short time available before publishing this report, it has not been possible to reflect this.
- 4. The Financial Settlement was very significantly worse for Central Bedfordshire than had been anticipated both in absolute and comparative terms. Whilst the full details have still to emerge and will require careful analysis, on the face of it the loss of Government funding support is 94% over the life of the Medium Term Financial Plan or £28.1M in cash terms. Moreover, the greatest reductions are in the early years of the Plan.
- 5. Therefore, it will be necessary to identify proposals for responding to this dramatic reduction in funding support from Government over and above the proposals contained in the draft Budget/updated MTFP once the full details of the Settlement have been fully assessed.
- 6. What is clear is that Government has made the assumption in its financial modelling that councils will raise council tax by both the 2% precept earmarked for adult social care and an assumed 1.75% for inflation in each of the next four years.

7. This is in addition to the significant efficiencies contained in the draft Budget/updated MTFP.

RECOMMENDATIONS

The Committee is asked to:

- 1. consider the Council's Draft Budget for 2016/17 and Medium Term Financial Plan; and
- 2. submit its comments, observations and recommendations in respect of the Executive's proposals to the meeting of the Executive on 9 February 2016.

Executive Summary

Members are requested to bring along the following papers issued for the meeting of the Executive on 12 January 2016 to this Committee meeting:

1. Draft Budget 2016/17 and Medium Term Financial Plan 2016/17 – 2019/20.

Council Priorities

- 8. The Council approved the Medium Term Financial Plan (MTFP) for 2015/16 to 2018/19 in February 2015. The MTFP has been updated and extended to 2019/20 and an initial draft Budget for 2016/17 prepared, reflecting further changes in funding, including the impact of the Local Authority Financial Settlement announced in December 2015 and new cost pressures and offsetting efficiencies.
- 9. The Council's priorities are:
 - Enhancing Central Bedfordshire.
 - Great Resident Services.
 - Improving education and skills.
 - Protecting the vulnerable; improving wellbeing.
 - Creating stronger communities.
 - A more efficient and responsive Council.

These priorities are reflected in the budget proposals included in this report.

Corporate Implications

Legal Implications

10. See Executive papers.

Risk

11. See Executive papers.

Financial Implications

12. See Executive papers.

Equalities Implications

13. See Executive papers.

Timetable Milestones

The key milestones in the timetable for Council to agree its budget in February 2016 are set out in the below:

| Timetable MilestonesDate | Body | Outcome |
|--------------------------------|---|---|
| Early January 2016 | Public | Budget papers made available to Public and Public Consultation commences |
| 12 th January 2016 | Executive | Considers Draft Budget and MTFP |
| 14 th January 2016 | Sustainable Communities Overview & Scrutiny | Consideration of efficiencies and savings and draft budget proposals |
| 25 th January 2016 | Social Care, Health & Housing Overview & Scrutiny | |
| 28 th January 2016 | Children's Services Overview & Scrutiny | |
| 2 nd February 2016 | Corporate Resources Overview & Scrutiny | |
| 9 th February 2016 | Executive | Recommends Final Budget & MTFP |
| 25 th February 2016 | Council | Approves Budget & MTFP |
| 29 th February 2016 | Council | Reserve Council Meeting in case of delay in receiving notification of other precepts. |



Central Bedfordshire Council

SOCIAL CARE, HEALTH & HOUSING OVERVIEW AND SCRUTINY COMMITTEE 25 January 2016

Draft Capital Programme 2016/17 – 2019/20

Report of Cllr Richard Wenham, Executive Member for Corporate Resources (cllr.richard.wenham@centralbedfordshire.gov.uk)

Advising Officers: Charles Warboys, Chief Finance Officer (charles.warboys@centralbedfordshire.gov.uk)

This report relates to a non-Key Decision

Purpose of this report

1. The report allows Members the opportunity to review the Council's draft Capital Programme, which was presented to Executive on 12 January 2016

RECOMMENDATIONS

The Committee is asked to:

- consider the Council's Draft Capital Programme 2016/17 to 2019/20; and
- 2. submit its comments, observations and recommendations in respect of the Executive's proposals to the meeting of the Executive on 9 February 2016.

Executive Summary

Members are requested to bring along the following papers issued for the meeting of the Executive on 12 January 2016 to this Committee meeting:

1. Draft Capital Programme 2016/17 to 2019/20.

Council Priorities

2. The Council approved the Capital Programme for 2015/16 to 2018/19 in February 2015. The Capital Programme has been updated and extended to 2019/20.

- 3. The Council's priorities are:
 - Enhancing Central Bedfordshire.
 - · Great Resident Services.
 - Improving education and skills.
 - Protecting the vulnerable; improving wellbeing.
 - Creating stronger communities.
 - · A more efficient and responsive Council.

These priorities are reflected in the budget proposals included in this report.

Corporate Implications

Legal Implications

4. See Executive papers.

Risk

5. See Executive papers.

Financial Implications

6. See Executive papers.

Equalities Implications

7. See Executive papers.

Timetable Milestones

8. The key milestones in the timetable for Council to agree its budget in February 2016 are set out in the below:

Timetable Milestones

| Date | Body | Outcome |
|--------------------------------|---|---|
| Early January 2016 | Public | Budget papers made available to Public and Public |
| 4 Oth 1 | <u> </u> | Consultation commences |
| 12 th January 2016 | Executive | Considers Draft Capital Programme |
| 14 th January 2016 | Sustainable Communities Overview & Scrutiny | Consideration of the Draft Capital Programme |
| 25 th January 2016 | Social Care, Health & Housing Overview & Scrutiny | |
| 28 th January 2016 | Children's Services Overview & Scrutiny | |
| 2 nd February 2016 | Corporate Resources Overview & Scrutiny | |
| 9 th February 2016 | Executive | Recommends Final Capital Programme |
| 25 th February 2016 | Council | Approves Capital Programme |
| 29 th February 2016 | Council | Reserve Council Meeting in case of delay in receiving notification of other precepts. |



Central Bedfordshire Council

SOCIAL CARE, HEALTH & HOUSING OVERVIEW AND SCRUTINY COMMITTEE

25 January 2016

DRAFT BUDGET FOR THE HOUSING REVENUE ACCOUNT (LANDLORD BUSINESS PLAN)

Report of Cllr Richard Wenham, Executive Member for Corporate Resources (richard.wenham@centralbedfordshire.gov.uk); and Cllr Carole Hegley, Executive Member for Social Care, Health and Housing (carole.hegley@centralbedfordshire.gov.uk)

Advising Officers: Julie Ogley, Director of Social Care, Health and Housing (julie.ogley@centralbedfordshire.gov.uk); and Charles Warboys, Chief Finance Officer (charles.warboys@centralbedfordshire.gov.uk)

This report relates to a non-Key Decision

Purpose of this report

1. The report allows Members the opportunity to review the Council's draft budget for the Housing Revenue Account (Landlord Business Plan), which was presented to Executive on 12 January 2016.

RECOMMENDATIONS

The Committee is asked to:

- 1. consider the Council's Draft Budget for the Housing Revenue Account (Landlord Business Plan); and
- 2. submit its comments, observations and recommendations in respect of the Executive's proposals to the meeting of the Executive on 9 February 2016.

Executive Summary

Members are requested to bring along the following papers issued for the meeting of the Executive on 12 January 2016 to this Committee meeting:

1. Draft Budget for the Housing Revenue Account (Landlord Business Plan).

Council Priorities

- 2. The Council approved the budget for the Housing Revenue Account (Landlord Business Plan) in February 2015. The plan has been updated and extended to 2019/20 and an initial draft Budget for 2016/17 prepared, reflecting further changes in funding, including the impact of the Local Authority Financial Settlement announced in December 2015 and new cost pressures and offsetting efficiencies.
- 3. The Council's priorities are:
 - Enhancing Central Bedfordshire.
 - Great Resident Services.
 - Improving education and skills.
 - Protecting the vulnerable; improving wellbeing.
 - Creating stronger communities.
 - A more efficient and responsive Council.

These priorities are reflected in the budget proposals included in this report.

Corporate Implications

Legal Implications

4. See Executive papers.

Risk

5. See Executive papers.

Financial Implications

6. See Executive papers.

Equalities Implications

7. See Executive papers.

Timetable Milestones

8. The key milestones in the timetable for Council to agree its budget in February 2016 are set out in the below:

Timetable Milestones

| Date | Body | Outcome |
|--------------------------------|---|---|
| Early January 2016 | Public | Budget papers made available to Public and Public Consultation commences |
| 12 th January 2016 | Executive | Considers Draft HRA Budget and Plan |
| 25 th January 2016 | Social Care, Health & Housing Overview & Scrutiny | Consideration of efficiencies and savings and draft HRA budget proposals |
| 2 nd February 2016 | Corporate Resources Overview & Scrutiny | |
| 9 th February 2016 | Executive | Recommends Final HRA Budget and Plan |
| 25 th February 2016 | Council | Approves HRA Budget and Plan |
| 29 th February 2016 | Council | Reserve Council Meeting in case of delay in receiving notification of other precepts. |



Central Bedfordshire Council

SOCIAL CARE, HEALTH AND HOUSING OVERVIEW AND SCRUTINY COMITTEE – 25 January 2016

QUARTER TWO PERFORMANCE MONITORING REPORT

Advising Officers: Julie Ogley, Director of Social Care, Health and Housing (julie.ogley@centralbedfordshire.gov.uk; Muriel Scott, Director of Public Health (Muriel.scott@centralbedfordshire.gov.uk) and Nick Murley, assistant Director, Resources and Martin Westerby, Head of Public Health, Adults and Older People

Purpose of this report

 This report provides information on how the Social Care, Health and Housing and Public Health Directorates are contributing to the Medium Term Plan (MTP).

RECOMMENDATIONS

The Committee is asked to consider and comment on the report.

Overview

- 2. Social Care, Health and Housing and Public Health Directorates contribute to the MTP priority "Promote health and wellbeing and protecting the vulnerable".
- 3. There are seven indicators for this priority. The arrows in the scorecard shows the performance "direction of travel" and the RAG symbols show whether or not agreed targets are being met.



| Promote health and wellbeing and | protect the vulnerable | | | | |
|--|------------------------|--------|--------|----------|----------|
| | | | | | |
| C1 MTP Protecting Vulnerable Adults | Quarterly | Green | Sep 15 | → | * |
| C2 MTP Additional 'Extra Care' flats provided | Quarterly | Red | Sep 15 | → | A |
| C3 MTP Percentage of decent homes (Council stock) | Quarterly | 99.9 % | Sep 15 | → | |
| C4a MTP Village Care Scheme % Coverage | Quarterly | 100 % | Sep 15 | → | * |
| C5a MTP Percentage of council commissioned dementia classed as 'good' or 'excellent' | Quarterly | 81.8 % | Sep 15 | + | * |
| C8a MTP % Adults 18+ receiving self directed support | Quarterly | 91.8 % | Sep 15 | ↑ | ! |
| C6b MTP % Carers receiving self directed support | Quarterly | 88.4 % | Sep 15 | ↑ | ļ. |
| C7 MTP Percentage of 40 to 74 year olds offered a health check | Quarterly | 90.4 % | Sep 15 | ↑ | 0 |
| | | | | - | - |

- 4. Overall performance is good and is consistent with last year's outturn. Four of the measures under performed against local targets. Two of these are Red: Number of Additional "Extra Care" flats provided (C2 MTP) and Clients receiving self directed support (C6 MTP) and two are Amber, Percentage of decent homes (Council stock) (C3 MTP) and Percentage of 40-74 year olds offered a health check (C7 MTP).
- 5. C2 MTP, Number of additional "Extra Care" flats remains Red as the revised delivery date of January 2016 for Priory View exceeds the MTP target of 2014. However building completion for Priory View remains on course and delivery on Independent Living Schemes continues.
- 6. C6 MTP, the number of social care clients receiving self directed support. This measure has now been replaced by two measures which reports separately on the proportion of people using social care and the number of carers receiving self-directed support. In September 2015, the percentage of people using social care who received self directed support increased from 86% to 92% for service users and from 85% to 88% for carers.
- 7. C3 MTP The percentage of decent homes (Council stock) remains Amber. This remains a high performing measure at 99.9%. Work has commenced on the 3 Council owned properties which did not meet the decent homes standard, as reported in quarter one. Under the Asset Management Strategy, the focus is now on refurbishment and replacing elements within the homes when they are needed and not by the age of the element as required under the Decent Homes Standard. (Elements include kitchens, bathrooms, etc.)
- 8. C7 MTP Percentage of 40-74 year olds offered a health check (C7 MTP). Although below the local target, this remains as high performing measure. At the end of September, the percentage of health checks offered remained slightly below target at 90% (7448 invited against a target of 8242). Overall performance remains in line with national rates.
- 9. The remaining indicators are performing in line with the milestones set.
- 10. Performance against C1 MTP, Protecting vulnerable adults, continues to be maintained. The safeguarding team received 678 safeguarding reports during the quarter, which is an increase of 27% from the last quarter. Information sharing reports account for this increase, which constitute 66% of safeguarding activity in the quarter. Of the safeguarding enquiries concluded within the quarter, in 67% of cases the risk was reduced or removed. A review of enquiries made regarding safeguarding shows a higher proportion of reported good and excellent outcomes.
- 11. The MTP target of 100% of Central Bedfordshire covered by a Village Care Scheme continues to be achieved. The Good Neighbour and Village Care Scheme offers help and support to residents in There is in

every ward across Central Bedfordshire. In quarter two 815 volunteers completed 3152 jobs for over 600 residents. This was an increase of 603 jobs from last quarter. Approximately 70% of all the jobs were transport related and some of the increase was due to people being transported to receive flu vaccinations. Additional funding has been made to support the expansion of Village Care Schemes further across the south of Central Bedfordshire and to relaunch the Dunstable Scheme. A further scheme has been launched in Haynes.

- 12. Overall performance remains strong for Council commissioned dementia care rated as good or excellent (C5a MTP), however there was a slight drop from 84.5% to 82% of dementia care providers are rated good or excellent in quarter two. The Dementia Quality Mark (DQM) was relaunched at a workshop for Residential and Nursing Care Providers.
- 13. End of year data shows over achievement in performance for the number of residents invited for health checks. (C7 MTP).

Director's Summary - Social Care, Health and Housing

- 14. Overall performance remains good against the Medium Term priority "Promote health and wellbeing and protecting the vulnerable'.
- 15. Safeguarding awareness is improving. Information sharing across local partner agencies remains strong and helping to ensure timely response to safeguarding alerts. A review of enquiries made regarding safeguarding shows a higher proportion of reported good and excellent outcomes.
- 16. Although measures for reporting on people receiving self directed support has changed, local performance against national target remains strong. The number of people who received self directed support in quarter two increased for both service users and carers. This reflects the increased emphasis on person-centred care approach which is enabling more people to control how their care and support is delivered, particularly for carers.
- 17. C2 MTP Additional Extra Care Flats (Priory View) is anticipated for completion in January 2016. Good progress is being made on other independent living schemes such as Houghton Regis Central. Engagement with local residents will help to influence design of the Scheme.
- 18. The Village Care and Good Neighbour Schemes continue to expand across Central Bedfordshire. More jobs supporting people in their communities were carried out this quarter. Volunteers are also being trained by Trading Standards to protect vulnerable from cold callers.

The focus on commissioning for outcomes to improve the quality of care for people with dementia remains.

Director's Summary - Public Health

- 19. Health Checks continue to be an effective way to identify residents who are at high risk of developing cardio-vascular disease and then to provide them with support to reduce this risk through changing lifestyle behaviours and / or medication.
- 20. At the end of September the percentage of Health Checks offered remained slightly below target at 90% (7448 invited against a target of 8242). The conversion rate, which is the proportion of Health Checks delivered against those offered, at 43.2% is lower than our target of 66% but in line with national rates.
- 21. Work has continued to support GP practices including improved promotional literature for patients and sharing best practice. Point of care blood testing has been introduced in practices to reduce the number of appointments and therefore increase uptake of the health check. A number of practices who have successfully delivered Health Checks have expressed an interest in providing this offer to the patients of other practices; the contractual arrangements to enable this to happen are being actively explored.

Council Priorities

22. The quarterly performance report underpins the delivery of the Council's priorities, more specifically in the area of promoting health and well being and protecting the vulnerable.

Corporate Implications

Legal Implications

23. There are no direct legal implications.

Financial Implications

24. There are no direct financial implications.

Equalities Implications

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

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

Risk Implications

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

Appendices

The following Appendix is attached.

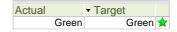
28. Appendix A – Social Care, Health and Housing and Public Health measures

Background Papers

29. The following background papers, not previously available to the public, were taken into account and are available on the Council's website:

None







Key Points

Current Performance: A review of enquiries (undertaken in the main by care providers) shows a higher proportion of good and excellent outcomes.

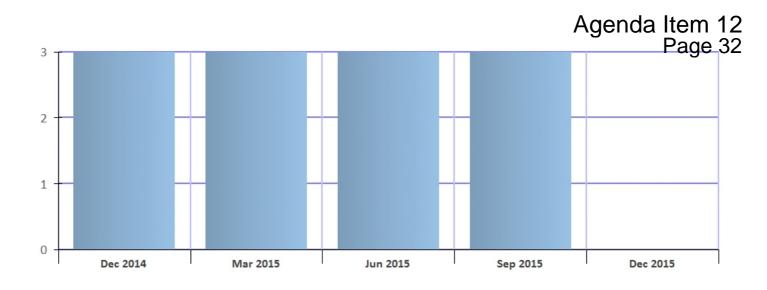
Planned Actions: Outcomes classed as adequate or below are being kept under review and themes are addressed through a care provider specific sub group of the Safeguarding Adults Board.

Description & Settings

Assessed on progress against milestones Lead: Administrator, Model Units: RAG Rating Reporting Frequency: Quarterly Good Performance: Bigger is Better

Accumulation: Latest Thresholds: 2.5, 1.5

| C1 MTP Protecting Vulnerable Adults | | | | | | | |
|-------------------------------------|-----------|----------------------------------|--|---|--|--|--|
| to Dec 14 | to Mar 15 | to Jun 15 | to Sep 15 | to Dec 15 | | | |
| Green | Green | Green | Green | | | | |
| Green | Green | Green | Green | | | | |
| | Green | to Dec 14 to Mar 15 Green Green | to Dec 14 to Mar 15 to Jun 15 Green Green Green | to Dec 14 to Mar 15 to Jun 15 to Sep 15 Green Green Green Green | | | |









Key Points

Current Performance: Delivery on the independent living schemes continues. Building completion for Priory View which is anticipated in January 2016 remains on course.

Planned Actions: Work on additional sites for independent living schemes is on-going. Houghton Regis Central development is progressing.

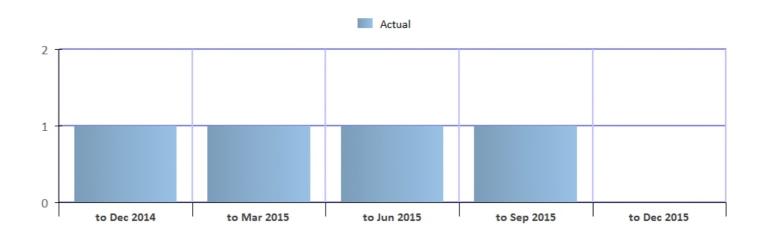
Description & Settings

Assessed on progress against milestones Lead: Administrator, Model Units: RAG Rating

Reporting Frequency: Quarterly Good Performance: Bigger is Better

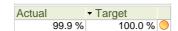
Accumulation: Latest Thresholds: 2.5, 1.5

| | C2 MTP Additional 'Extra Care' flats provided | | | | | | | |
|--------|--|------------------------|-----|-----|--|--|--|--|
| | to Dec 2014 to Mar 2015 to Jun 2015 to Sep 2015 to | | | | | | | |
| Actual | Red | Red | Red | Red | | | | |
| Target | Green | reen Green Green Green | | | | | | |





C3 MTP Percentage of decent homes (Council stock)



Key Points

Current Performance: This remains a high performing measure. Work has commenced on the 3 Council-owned properties which do not meet the decent homes standard, the condition of elements within the homes, eg kitchen/bathrooms remain fit for purpose.

Planned Actions: Work programme for repairs is underway.

Description & Settings

Stock survey completed at the beginning of the year to identify the percentage of homes meeting the Decent Homes standard. Activity is then planned and implemented to bring this percentage up to 100% by the end of the year.

Lead: Administrator, Model

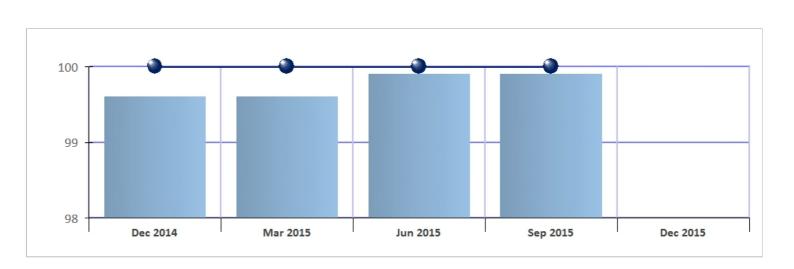
Units: Percentage

Reporting Frequency: Quarterly Good Performance: Bigger is Better

Accumulation: Latest

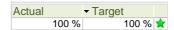
Thresholds: -0.001%, -10%

| | C | C3 MTP Percentage of decent homes (Council stock) | | | | | | | | |
|--------|---------------------------------|---|---------|---------|--|--|--|--|--|--|
| | Dec 14 Mar 15 Jun 15 Sep 15 Dec | | | | | | | | | |
| Actual | 99.6 % | 99.6 % | 99.9 % | 99.9 % | | | | | | |
| Target | 100.0 % | 100.0 % | 100.0 % | 100.0 % | | | | | | |









Performance

Key Points

Current Performance: The Good Neighbour and Village Care schemes offers help and support to residents in Central Bedfordshire. Between July and September 2015, 815 volunteers completed 3152 jobs for 666 residents, an increase of 603 jobs compared to last quartier. 70% of all jobs completed were transport related, and some of the increase was due to people being transported to receive 'flu jabs.

Additional one off funding has been granted to expand Village Care schemes across the south of Central Bedfordshire, and to relaunch the Dunstable scheme. A new scheme has been launched in Haynes.

Training has been undertaken with Trading Standards with group volunteers to become nominated good neighbours to protect vulnerable residents from cold calling.

Planned Actions: Work with Council community physical activity team to encourage residents to be more active through increasing the numbers of trained volunteers

Description & Settings

Lead: Administrator, Model Units: Percentage

Reporting Frequency: Quarterly Good Performance: Bigger is Better

Accumulation: Latest Thresholds: -0.001%, -10%

| | C4a MTP Village Care Scheme % Coverage | | | | | | | | |
|--------|--|-------|----------|----------|----------|--|--|--|--|
| | Dec 2014 Mar 2015 | | Jun 2015 | Sep 2015 | Dec 2015 | | | | |
| Actual | 100 % | 100 % | 100 % | 100 % | | | | | |
| Target | 100 % | 100 % | 100 % | 100 % | | | | | |





- Target Actual 60.0 % 🚖



Current Performance:

There has been a slight drop in performance. The Dementia Quality Mark (DQM) was relaunched at the Residential and Nursing workshop on 14th October 2015.

Planned Actions: The focus continues to be commissioning for outcomes and to improve the quality of care for people with dementia.

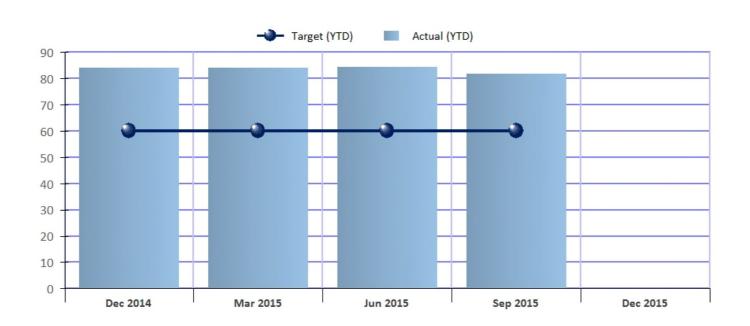
Description & Settings

Lead: Administrator, Model Units: Percentage

Reporting Frequency: Quarterly Good Performance: Bigger is Better

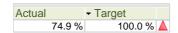
Accumulation: Latest Thresholds: -0.001%, -10%

| | | Dec 14 | Mar 15 | Jun 15 | Sep 15 | Dec 15 |
|--|-------------|--------|--------|--------|--------|--------|
| C5a MTP Percentage of council commissioned dementia classed as 'good' or 'excellent' | Actual | 84.1 % | 84.1 % | 84.5 % | 81.8 % | |
| | Target | 60.0 % | 60.0 % | 60.0 % | 60.0 % | |
| demonia diadeda de geod en executoria | Performance | * | * | * | * | ?! |





C6 MTP % clients receiving self directed support



Performance

Key Points

Current Performance: The proportion of people receiving self-directed support is no longer collected by the Health and Social Care Information Centre (HSCIC). It has been replaced by two measures that reports the proportion of people using social care, who receive self-directed support and the number of carers receiving self-directed support.

In June 2015, 86.0% of people using social care, receive self-directed support and 85.2% of carers receive self-directed support. The outturns for 2014-15 are still being verified by the HSCIC and will be reported in October.

Planned Actions: When the 2014-15 outturn is verified, it will be used to review the performance and a new baseline, which will be monitored by the

Future reporting will be based on the new structure which seperates carers from service users.

Description & Settings

This is the number of clients receiving self directed support calculated as a percentage of the total number of social care clients.

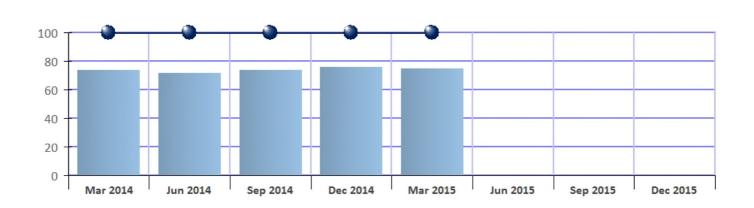
Lead: Administrator, Model Units: Percentage

Reporting Frequency: Quarterly Good Performance: Bigger is Better

Accumulation: Latest Thresholds: -0.001%, -10%

| | | Mar 14 | Jun 14 | Sep 14 | Dec 14 | Mar 15 |
|--|--------|---------|---------|---------|---------|---------|
| C6 MTP % clients receiving self directed | Actual | 73.6 % | 71.9 % | 73.8 % | 75.7 % | 74.9 % |
| support | Target | 100.0 % | 100.0 % | 100.0 % | 100.0 % | 100.0 % |

Target





Actual Target •



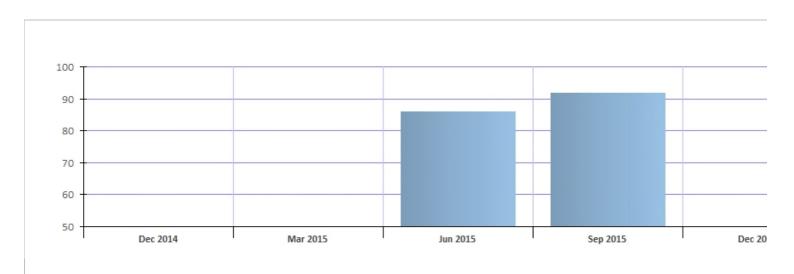
Key Points

Current Performance: There has been improvement in the proportion of people receiving self-directed support. 91.8% of service users are in receipt of self-directed support compared to 86% in June 2015.

Planned Actions: Continue to improve performance through promotion of a person-centred approach and information on self-directed support.

| | | Jun 15 | Sep 15 | Dec 15 |
|--|--------|--------|--------|--------|
| CGo MTD 9/ Adulta 19 L receiving celf directed curport | Actual | 86.0 % | 91.8 % | |
| C6a MTP % Adults 18+ receiving self directed support | Target | | | |
| C6b MTP % Carers receiving self directed support | Actual | 85.2 % | 88.4 % | |
| Cob MTP % Carers receiving sell directed support | Target | | | |

| | | Mar 14 | Jun 14 | Sep 14 | Dec 14 | Mar 15 |
|--|--------|---------|---------|---------|---------|---------|
| C6 MTP % clients receiving self directed | Actual | 73.6 % | 71.9 % | 73.8 % | 75.7 % | 74.9 % |
| support | Target | 100.0 % | 100.0 % | 100.0 % | 100.0 % | 100.0 % |







| Actual | Target | - |
|--------|--------|-----|
| 88.4 % | | ? 🚶 |



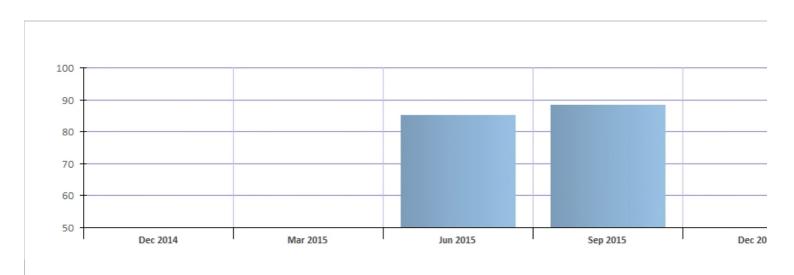
Key Points

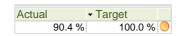
Current Performance: There has been improvement in the proportion of people receiving self-directed support. 88.4% of carers received self-directed support compared to 85.2% in June 2015.

Planned Actions: Continue to improve performance through promotion of a person-centred approach and information on self-directed support.

| | | Jun 15 | Sep 15 | Dec 15 |
|--|--------|--------|--------|--------|
| C6b MTP % Carers receiving self directed support | Actual | 85.2 % | 88.4 % | |
| Cob With % Caleis receiving sell directed support | Target | | | |
| C6a MTP % Adults 18+ receiving self directed support | Actual | 86.0 % | 91.8 % | |
| Coa WITE 10 Addits 10+ receiving sell directed support | Target | | | |

| | | Mar 14 | Jun 14 | Sep 14 | Dec 14 | Mar 15 |
|--|--------|---------|---------|---------|---------|---------|
| C6 MTP % clients receiving self directed | Actual | 73.6 % | 71.9 % | 73.8 % | 75.7 % | 74.9 % |
| support | Target | 100.0 % | 100.0 % | 100.0 % | 100.0 % | 100.0 % |





Performance Performance 20 80 10 100

Key Points

Current Performance: End of year data shows over achievement in performance for the number of residents invited for Health Checks: 17,281 invited against 16,195 target.

Planned Actions: Over-performance continues, but, thanks to reinforcement of the message that over-invitation has some consequences for the achievement of conversion rate, is significantly reduced at end of year. Use of Quest Browser software (which can directly interrogate and pull data direct from GP systems), now specified in the contract with GPs, and which they will be using from Q1 15/16, will help target invitations better, including for those at highest risk and those yet to be offered a Health Check, as the new 5 year period begins post April 2015.

Description & Settings

Measure is the number offered a health check but the indicator also records the number receiving a health check. Reported quarterly - data 3 mths in arrears

Lead: Administrator, Model
Units: Percentage
Reporting Frequency: Quarterly
Good Performance: Bigger is Better
Accumulation: Latest

Thresholds: -0.001%, -10%

| | | Dec 14 | Mar 15 | Jun 15 | Sep 15 | Dec 15 |
|--|--------|---------|---------|--------|--------|--------|
| C7 MTP Percentage of 40 to 74 year olds offered a health check | Actual | 117.5 % | 106.7 % | 85.3 % | 90.4 % | |
| PH 001D - Target number of people offered a health check | Actual | 12,147 | 16,195 | 4,121 | 8,242 | |
| PH 001N - Actual number offered a health check | Actual | 14,271 | 17,281 | 3,517 | 7,448 | |
| PH 001a - Percentage of health checks delivered to people aged 40 to 74 years of age | Actual | 78 | 77 | 56 | 59 | |
| PH 001aD - Target number of health checks delivered | Actual | 8,019 | 10,690 | 2,727 | 5,454 | |
| PH 001aN - Actual number of health checks delivered | Actual | 6,258 | 8,240 | 1,513 | 3,220 | |

| | | | | | Healt | h Check Co | onversion F | Rate % of T | arget | | | | |
|--------|--------|--------|--------|--------|--------|------------|-------------|-------------|--------|--------|--------|--------|--------|
| | Dec 14 | Jan 15 | Feb 15 | Mar 15 | Apr 15 | May 15 | Jun 15 | Jul 15 | Aug 15 | Sep 15 | Oct 15 | Nov 15 | Dec 15 |
| Actual | 43.9 % | 45.8 % | 45.5 % | 47.7 % | 49.3 % | 44.4 % | 43.0 % | 41.8 % | 42.7 % | 43.2 % | 45.5 % | | |
| Target | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | 66.0 % | | |



Central Bedfordshire Council

SOCIAL CARE HEALTH AND HOUSING OVERVIEW AND SCRUTINY COMMITTEE

25 January 2016

BEDFORDSHIRE MENTAL HEALTH AND WELLBEING SERVICE 100 DAY PLAN REVIEW AND YEAR ONE PLAN UPDATE

Advising Officer: John Wilkins Managing Director and Deputy Chief Executive

Luton Mental Health and Wellbeing Services.

(john.wilkins@elft.nhs.uk)

The purpose of the attached report is to provide Members with an update on the Bedfordshire Mental Health and Wellbeing Service provided by the East London Foundation Trust.

RECOMMENDATIONS

The Committee is asked to consider and comment on the progress that has been made on the implementation of the ELFT plan, the key achievements since April 2015 and the future focus.

Council Priorities

This report supports the following council priority

Protecting the vulnerable, promoting well being

Corporate Implications

The Mental Health and Wellbeing Service report has been produced by the East London Foundation Trust and any corporate implications to the Council are detailed in the report.

Conclusion and next Steps

Members are requested to consider and comment on the information provided by the East London Foundation Trust.

Appendices

Appendix A – Bedfordshire Mental Health and Wellbeing Service 100 Day Plan Review and Year One Plan Update.





Appendix A

REPORT TO THE CENTRAL BEDFORDSHIRE COUNCIL'S OVERVIEW AND SCRUTINY COMMITTEE

BEDFORDSHIRE MENTAL HEALTH AND WELLBEING SERVICE 100 DAY PLAN REVIEW AND YEAR ONE PLAN UPDATE

1.0 Introduction

- 1.1 Since taking responsibility for Mental Health and Wellbeing in Bedfordshire in April 2015, East London Foundation Trust's vision has been to provide a high quality and integrated service for all residents through a single point of access. This has been in partnership with service users, their carers and families, GPs and primary care, the third sector and statutory partners and stakeholders, including the CCG, Bedford Borough Council and Central Bedfordshire Council, Bedford Borough and Central Bedfordshire Healthwatches, the police and other statutory services as well as the wider community.
- 1.2 The Trust's focus has been on improving the full range of integrated local services:
 - Establishing the Bedfordshire Wellbeing Service [IAPT] and addressing the historical waiting list
 - Reviewing 3rd sector sub-contract arrangements for children and adolescents, liaison with Bedford Hospital Paediatric services to develop care pathways
 - Primary care liaison and responsiveness
 - Inpatient services
 - Psychiatric liaison at Bedford Hospital
 - Police Liaison and S136 arrangements
 - Crisis and community services and pathways
 - Recovery services
 - Access to psychological therapies for people with mild and moderate mental health conditions
 - Dementia and post diagnosis
 - Autism and ADHD services
 - Interface with drug and alcohol services.

This is designed to make an improved offer for people with mental health problems with a broader range of recovery options including:

 Improving access to psychological treatment services for people with mild and moderate mental health problems



- High quality and therapeutic inpatient services reducing occupancy levels and placements out of the area
- More responsive crisis support, in particular, out of hours
- More accessible and local services provided in locality hubs
- Greater integration with primary care, schools, colleges, 3rd sector organisations and acute hospitals.
- 1.3 This paper outlines the 100 Day plan review, an update on implementation of the Year One plan and key achievements over the past 9 months.

2.0 100 Day Plan review (1 April 2015 – 9 July 2015)

- 2.1 The main focus of the 100 day plans were:
 - i) staff, service user and stakeholder engagement across all four contract lots to understand how services operate, what works well and what needs development,
 - ii) establishing the new Wellbeing Service (IAPT) service and developing plans to address the historical waiting list (Lot 1),
 - iii) ensuring that the recruitment plan is implemented to reduce staff vacancies and reliance on agency (Lots 1,2,4),
 - iv) implementing improvements in inpatient services and the redesign/reconfiguration of the inpatient services (Lot 2),
 - v) establishing the Recovery Partnership Board, undertaking a scoping exercise, facilitating service user feedback through focus groups and commissioning an external agency to support the development of an agreed vision (Lot 3),
 - vi) reviewing the Third sector sub-contract arrangements for children and adolescents, liaison with Bedford Hospital Paediatric services to develop care pathways further and work with senior staff on the development of a proposal for engaging staff in redesign of the current services (Lot 4)
 - vii) reviewing and establishing systems, processes, contract compliance and informatics and reporting arrangements across all Lots.

3.0 Bedfordshire Year One Plan

The attached high level Year One plan has been agreed with the CCG, Bedford Borough Council and Central Bedfordshire Council. Good progress has been made on the implementation of this plan and the key achievements since April 2015 are detailed below.

3.1 Staff Engagement

- Welcome events with the Trust's Chair and CEO were held in Bedfordshire.
 These were well attended with representation from a range of multi-disciplinary staff.
- Staff Six Month Review events with the Trust's Chair, Chief Executive Officer and the Bedfordshire Senior Team have also been undertaken and staff feedback is being used to inform the staff engagement and communications



plan for the rest of the year.

- The IAPT Clinical Lead worked with all staff who transferred to agree a new model and vision for the services. Liaison with key staff in adult and older adult mental health services to develop effective interfaces.
- The Deputy Medical Director and Deputy Director of Nursing met multidisciplinary clinical and social care practitioners and management leads across Bedfordshire individually, in team and ward meetings and staff workshops. The Deputy Director of Nursing also completed a series of workshops for all inpatient ward staff and organised an externally facilitated programme of senior nurse leadership events.
- The CAMHS Clinical Director met with senior staff and teams across Bedfordshire to scope the redesign requirements.
- The Older Adults Clinical Director met with staff in Inpatient and Community services and Local Authority colleagues to consider further developments.
- The Trust's CEO and Deputy Medical Director have met with medical staff to discuss what is working well and how services can be improved, in particular ADHD and Personality Disorder services.
- The Trust's CEO visited all the Bedfordshire Adult and Older Adult Community Team bases meeting Consultant Psychiatrists and Team Leaders.
- The Operations Director has worked with Administrative, Governance, Informatics and other leads to establish and/or develop existing systems in line with the Trust's policies and procedures.
- The Head of Admin (Trust HQ) met with key administrative staff and teams and clinical and social care leads across Bedfordshire and has proposed a review of administrative services.
- Interim Heads of HR and Finance worked with the new Directorate Management Team leads and other staff to develop local systems and information/data collection arrangements.

3.2 Service User and Carers

- With the People Participation Lead the Deputy Director of Nursing conducted a review of service user and carer involvement to begin developing a Patient, Public Involvement [PPI] strategy for Bedfordshire.
- A People Participation Lead has been appointed for Central Bedfordshire Council and the Bedford Borough Council post is currently being advertised.
- Two existing adult and older adult service stakeholder groups (Bedford and Central Bedfordshire) met and agreed to continue with and extend their membership.
- A CAMHS service user and carer quarterly group has been established and has met once, with a second meeting scheduled.
- The IAPT Clinical Lead has worked closely with current service users and set up a monthly feedback group.



- Service User Groups have been set up on all adult and older adult wards.
- Older Adult services continue to work with the Alzheimer's Society, providing a valuable source of support for aftercare.

3.3 Service Improvements and Care Pathway Review Groups

3.3.1 Improving Access to Psychological Therapies [IAPT] Bedfordshire Wellbeing Service

i) Current numbers of referrals and in treatment

There have been 5,846 referrals between April and December 2015, 2,201 for Bedford Borough Council and 3,645 for Central Bedfordshire Council. Recovery rates for the service are slightly below the national target of 50% at 49%, the split between the two councils is 49% recovery rate for Bedford Borough Council and 51% for Central Bedfordshire Council. Further work is being undertaken on access times and 60.8% of clients have been treated within 6 weeks and 84.6% within 18. The service is currently aiming to achieve a locally agreed 11.5% against national target of 15% for population coverage.

ii) Staffing

The service will employ 50 staff including Clinicians, Management and Admin. The service has 5 vacancies and these are being advertised and are currently being filled by agency staff.

iii) Accommodation

As part of the IAPT model, plans are underway to place IAPT staff in GP surgeries across Bedfordshire. Currently IAPT staff are in 25 practices which is 80% of practices with available space. The service has identified two sites, one in Bedford and one in Dunstable. The Bedford site will accommodate the Single Point of Referral Team and both sites will be used as a base for staff and will provide more therapy space.

iv) Clinical and IT system

The new clinical and IT (IAPTUS) system has been introduced to replace three different systems.

v) Improving Access and achieving the 15% population coverage target:

The service has been working hard towards increasing groups in community settings such presenting Wellbeing and stress workshops to local employers, Universities and the CCG. The service have been taking part in pop up events across Bedfordshire and will be taking part in the Wellbeing Sports Event taking place over a 6 week period from 2nd March 2016. The service has been promoted through local press releases which went out in November to support the 5 steps to Wellbeing Campaign.

vi) Inherited Waiting List:

The Trust inherited a waiting list of 1090 people and has introduced a range of initiatives to address this waiting list, including contacting all clients from the waiting list. The Trust also received additional funding from NHS England and Bedfordshire CCG to employ additional staff to address the waiting list. Of the 1090 people on the waiting list:



- 119 patients are currently in treatment, 68 are waiting to start treatment
- 904 patients either declined treatment, have completed treatment or withdrawn from treatment.
- All of the people on the inherited waiting list would have finished treatment by end of March 2016.

3.3.2 Child and Adolescent Mental Health Services [CAMHS]

- The Trust has worked with Bedfordshire CCG and other stakeholders to develop proposals for CAMHS Transformation funding to enhance early intervention, crisis and eating disorder services for Children and Young People. Funding for these new developments has recently been confirmed by Bedfordshire CCG and the Trust is now recruiting additional staff.
- Funding has been obtained from the CCG and Central Bedfordshire Council
 to deliver a CAMHS service in 12 schools on a pilot basis. Work to develop
 this with the head teachers involved is underway.
- Staff workshops and senior clinical discussions identified potential gaps between the proposed future vision and existing services. During September senior clinical staff were involved in gap analysis workshops to formulate the service model. This has informed the new vision and redesign plan for Bedfordshire CAMHS. The implementation of the plan is being overseen and monitored through the CAMHS Redesign Project Board. This Board is chaired by the Managing Director and includes representatives from the Trust and Bedford Borough and Central Bedfordshire Councils.
- Preliminary work on the crisis pathway for Bedfordshire residents has been undertaken with Bedford and L&D Hospitals' Paediatric services
- Service user quality indicators such as Did Not Attend [DNA] rates and waiting times were scoped and action plans have been developed.
- Two new Children's Safeguarding Leads have been appointed to cover Bedfordshire and Luton.

3.3.3 Adult and Older Adult Inpatient and Crisis Services

- An Inpatient Project Board was set up to oversee delivery of the inpatient reconfiguration business cases and manage ward moves.
- An adult inpatient ward was re-commissioned in Newham ensuring shorter lengths of stay and improved continuity of care for patients placed outside of Bedfordshire.
- Oakley Court, a 36 bed adult acute admission ward, with a 9 bed female only wing has been re-commissioned and opened.
- Keats Ward and the Mental Health Assessment Unit (MHAU) moved to Oakley Court to facilitate refurbishment of these wards at the Weller Wing, including removal of the dormitory areas and creation of single rooms to comply with CQC guidance. Keats Ward has now been refurbished and is back at the Weller Wing and the MHAU beds remained at Oakley Court.



- The refurbishment of Jade Ward (Luton) to create a new Psychiatric Intensive Care Unit [PICU] for Bedfordshire and Luton was undertaken and the new PICU opened in early October.
- In December 2015, Chaucer ward in the Weller Wing transferred to Fountains Court. This unit now provides inpatient accommodation for older people with mental health problems and continues to provide dementia assessment and continuing care beds. The unit is also being redesigned to provide additional activity, recreational and staff accommodation.
- Whichello's Wharf was temporarily closed in December 2015 following the discharge of the two remaining patients. The future use of this facility will be considered as part of the rehabilitation review which will be consulted on in Spring 2016.
- At the beginning of January 2016, all of the inpatient refurbishment and ward moves had been completed and the Bedfordshire patients returned from Jade ward in Newham and other wards in East London to local inpatient services. There are currently no adult acute or male psychiatric intensive care patients out of area. The only patients out of area will be females who require psychiatric intensive care and specialist placements funded by the CCG. Patients who require psychiatric intensive care will be accommodated in the Trust-wide unit in East London.
- Weekly bed management meetings and senior nurse meetings have been established to review bed utilisation and out of area placements.
- Review of the Crisis Team capacity, practice and functioning has been completed. We will be introducing psychology assistants to this team to provide psychological interventions for people in crisis.
- Rapid Response Teams and Duty Senior Nurse arrangements are now in place.
- Team workshops focussing on compassionate and high quality care have been undertaken with an on-going programme for all ward staff.
- 10-day recovery training is in place for all ward staff, focusing on personalised care planning, in line with the 'This is Me' concept.
- Care planning has been reviewed and reflective practice has been established on all wards and in staff meetings.
- A clinical leadership development programme is in place for Band 6 nurses and above.
- A review of therapeutic activities, engagement and interventions has been undertaken on all wards with actions identified to inform leadership and training programmes.

3.3.4 Older Adult Services

- Clinical and social care leadership is being reviewed and a Bedfordshire and Luton Clinical Network has been established.



- Medical staffing requirements have been reviewed and recruitment of additional consultants and other medical staff posts are under way.
- A Multi-disciplinary Memory Services National Accreditation Programme [MSNAP] group has been established to undertake the preparatory work for the accreditation of the three Bedfordshire Memory services.
- Work has begun with the CCG on redesign of the dementia care pathway and joint care arrangements.

3.3.5 Learning Disability Services

- A clinical engagement and service review workshop has been undertaken
- An implementation plan for service redesign is being developed.
- Clinical leadership is being reviewed and a new Associate Clinical Director and Consultant Psychiatrist is currently being recruited.
- Initial steps on integrated working has started with the two councils and will inform service redesign.
- A preliminary review of the existing strategies has been undertaken.

3.3.6 Recovery Services

- The Recovery Partnership Board has been established and meets regularly.
- A scoping exercise has been completed and patient focus groups started.
- Bedford Borough and Central Bedfordshire Healthwatches have undertaken focus groups and service user interviews about the current recovery services and how these should be developed. A report will be published in March 2016 and in the meantime, feedback sessions have been organised.
- A Recovery College has been established jointly with Bedfordshire University.
- A service user lead is advising the Board and is also organising the 'Tackle the Stigma Campaign'.
- The Centre for Mental Health is supporting the Partnership Board to facilitate the development of the new vision and plan.

3.3.7 Adult Care Pathway Review Groups

The Deputy Medical Director has established service and care pathway review groups with key clinical and social care staff for:

- Adult Community Teams and Assertive Outreach Teams
- ADHD
- Primary Care Liaison
- Perinatal Mental Health
- Personality Disorder.

The next phase will include primary care and GP input.



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3.3.8 Other Service Reviews

Preliminary reviews of Psychology, Occupational Therapy and Arts Therapy Services across Bedfordshire have been undertaken which have informed the scope for full reviews. Working with the Head of Admin, the Operations Director completed an administration review. Some changes have already taken place, e.g. co-location of some administrative staff with community teams to improve multidisciplinary team working.

3.4 **CQC Readiness Board**

A Bedfordshire and Luton Project Board has been set up, with Bedfordshire specific community and inpatient work streams. The Board is chaired by the Deputy Director of Nursing and oversees the preparatory and readiness work required to ensure that the Trust is compliant with CQC requirements. Several audits have already been undertaken with feedback to ward staff about how services can be improved.

3.5 **Crisis Concordat**

The Deputy Medical Director was involved in the development and sign off of the Bedfordshire and Luton Crisis Concordat and is the lead for delivery of the relevant crisis and mental health actions. Work continues with partners on the development of a business case for a new mental health street triage team. This team will include a paramedic, police officer and nurse.

3.6 **Ri0 Electronic Patient Record and Clinical System**

A local Ri0 Project Board was established to oversee delivery of Clinical System Deployment across Bedfordshire and reports to the Trust's Electronic Patient Systems Board, chaired by the Medical Director.

The Bedfordshire deployment plan is currently being implemented and is on track to be completed by March 2016.

3.7 Stakeholder Engagement

The Associate Director of Communications and Engagement has produced a Stakeholder Engagement plan which is regularly reviewed. The Managing Director, Deputy Medical Director and Operations Director have been attending/meeting with key statutory planning and strategic groups as well as Bedfordshire Third sector and other groups. Other work has included:

3.8 **CCG and Health Locality Boards**

In conjunction with the CCG's Clinical Director, the Managing Director and Deputy Medical Director have met with most of the Bedfordshire Health Locality Boards and some GP practices at events organised by the CCG. The Deputy Medical Director also attends the CCG's Primary Care Commissioning Forum.

Overview and Scrutiny and Health and Wellbeing Boards 3.9

The Managing Director has presented service plans to the two Bedfordshire Health and Wellbeing Boards and Overview and Scrutiny Committees. The Managing

Director is also working with Central Bedfordshire Council's Director of Social Care, Housing and Health on estates matters.

3.10 Local Safeguarding Boards

The Trust's Children and Adult Safeguarding Leads have been working with local staff and the two Local Safeguarding Boards and their leads in Bedfordshire.

3.11 Bedford Borough Healthwatch and Central Bedfordshire Healthwatch

The Managing Director meets quarterly with both organisations to consider public and patient feedback and service plans.

3.12 Bedfordshire Police

The Managing Director and Deputy Medical Director met the Deputy Police Constable and Head of Community Policing to review and agree partnership working arrangements. Further meetings are planned with the Chief Constable and the Police and Crime Commissioner. The Managing Director is also liaising with the Police's MH Lead Chief Inspector and the Trust is represented on the multi-disciplinary partnership group chaired by the Chief Inspector.

3.13 Bedfordshire University

A joint ELFT and Bedfordshire University Academy for mental health nursing is being established and will be launched in April 2016. Lecturers and clinical practice tutors are currently being recruited and will hold joint contracts with ELFT and the University.

3.14 Trust Corporate Services

The Managing Director worked closely with key corporate staff, in particular, Informatics, ICT, Payroll, Assurance, to merge existing procedures and practices with Trust-wide policies and systems.

3.15 Senior Management Team and Directorate Management Team

3.15.1 Senior Team [ST]

The new Clinical Director for Bedfordshire (Dr Zelpha Kittler) was appointed in September and started in November. The new Bedfordshire Director for Mental Health and Wellbeing Services (Michelle Bradley) was appointed in December and will start at the beginning of February 2016. Interim Heads of Finance, HR and OD and a new Head of Quality and Performance have also been appointed. The ST met weekly to oversee progress on delivery of the 100-Day mobilisation and now meet fortnightly to oversee delivery of the Year One plans, review any operational or clinical issues and agree management and/or service plans.

3.15.2 Directorate Management Teams

The Integrated Directorate Management Team [DMT] for Bedfordshire involving existing clinical and management staff was established during the 100-Day period and continues to meet monthly.



Chaired by clinical and management leads and reporting to the DMT, Management Groups have been established to cover IAPT, CAMHS, Adult and Older Adult Inpatients, Adult and Older Adult Community and Learning Disability. A Recovery Project Team is also in place.

3.16 Local Systems, Processes and Reporting

Work has been undertaken in these areas and robust arrangements are now in place.

4.0 Further work over the next three months

- 4.1 The Year One plan will continue to be implemented, as per the target dates. The focus of the work over the next three months will include:
 - Staff, service user and stakeholder engagement and development of clinical and social care leadership. (All Lots)
 - Continue to implement the recruitment plan to: i) reduce vacancies to below 5%, ii) eliminate, where possible, agency use, iii) reduce reliance on bank staff. (All Lots)
 - Refurbish existing community properties to ensure that they are: i) fit for purpose and facilitate co-location of staff, and ii) finalise the 1st Draft of the Estates Plan to include proposals for the re-development of the Weller Wing. (All Lots).
 - Ensure that the Bedfordshire Wellbeing Service's historical waiting list patients are all in treatment. (Lot 1)
 - Develop the Psychiatric Liaison Service to Bedford Hospital, subject to further CCG funding in 2016/17. (Lot 2)
 - Implement the redesign and improvement of adult and older community services, including the incorporation of the Adult Assertive Outreach functions within the Adult Community Mental Health Teams and development of Primary Care Liaison for adults and older adults in each of the five health localities. (Lot 2).
 - Continue with service user focus groups and engagement for the Recovery Partnership Board and produce the new vision and model for future recovery services. (Lot 3)
 - Review the Third sector sub-contract arrangements for children and adolescents and work with Bedford Hospital Paediatric services to develop care pathways, in particular, crisis. (Lot 4)
 - Work with senior CAMHS staff on delivery of the redesign plans for Bedfordshire CAMHS and continue to monitor progress through the joint ELFT, Central Bedfordshire Council and Bedford Borough Council's CAMHS Project Board. (Lot 4)



| YEAR ONE (2015/16) HIGH LEVEL MOBILISATION PLAN BEDFORDSHIRE MENTAL HEALTH AND WELLBEING SERVICES | Apr- | May- | Jun- | Jul- | Aug- | Sep- | Oct- | Nov- | Dec- | Jan- | Feb- | Mar- |
|--|------|------|------|------|------|------|------|------|------|------|------|------|
| LOT 1: Improving Access to Psychological Therapies [IAPT] | | | | | | | | | | | | |
| Mobilisation of new Bedfordshire Wellbeing Service | | | | | | | | | | | | |
| Address historical and inherited waiting list and ensure all patients are seen. | | | | | | | | | | | | |
| 3. Consult on and implement a Single Point of Access/Referral | | | | | | | | | | | | |
| LOT 2: Adult, Older Adult and Learning Disability Services | | | | | | | | | | | | |
| Mobilisation of Business Cases: | | | | | | | | | | | | |
| Bedfordshire Inpatient Services: Re-commission Oakley Court (36 beds), refurbish Keats and Chaucer Ward and provide loca Psychiatric Intensive Care beds | | | | | | | | | | | | |
| Enhance Liaison Psychiatry Services | | | | | | | | | | | | |
| Enhance Older Adult Services | | | | | | | | | | | | |
| Review establishment of clear crisis and self-harm assessment and treatment pathways | | | | | | | | | | | | |
| Agree plan and implement clear crisis and self-harm assessment and treatment pathways | | | | | | | | | | | | |
| 4. Consult with Primary Care to agree Primary Care Liaison Service | | | | | | | | | | | | |
| 5. Establish Primary Care Liaison service within each Locality | | | | | | | | | | | | |
| 6. Establishment of care pathways for ASD and ADHD | | | | | | | | | | | | |
| 7. Review Approved Mental Health Practitioner [AMHP] Service | | | | | | | | | | | | |
| 8. Provision of plan for enhancing Approved Mental Health Practitioner [AMHP] Service | | | | | | | | | | | | |



| YEAR ONE (2015/16) HIGH LEVEL MOBILISATION PLAN | ٤ | \ <u>_</u> | ۲ | | -6 | 6 | . | ' | <u>ل</u> | ÷ | - | ٤ |
|---|----|------------|-----|----------|----------|-----|----------|----------|----------|-----|-----|----|
| BEDFORDSHIRE MENTAL HEALTH AND WELLBEING SERVICES | Ap | Ma | Jul | Jul 4 | Au 45 | Sel | 00 4 | Nov- | De | Jar | Feb | Ma |
| Consult and implement new Single Point of Access/Referral across all Lots – separate to IAPT SPoA | | | | | | | | | | | | |
| 10. Implement new model and care pathway for people with learning disability | | | | | | | | | | | | |
| 11. Implement inpatient and community Estates Improvement Plan | | | | | | | | | | | | |
| LOT 3: Recovery Services | | | | | | | | | | | | |
| Establish Recovery College and agree new rehabilitation and recovery programme with all stakeholders | | | | | | | | | | | | |
| 2. Start implementation of new rehabilitation and recovery model | | | | | | | | | | | | |
| LOT 4: Child and Adolescent Mental Health Services | | | | | | | | | | | | |
| Re-organisation of current CAMHS teams from 3 to 2 | | | | | | | | | | | | |
| 2. Single referral / assessment process for Tier 2 and Tier 3 CAMHS | | | | | | | | | | | | |
| 3. Undertake gap analysis and review with staff and redesign of service | | | | | | | | | | | | |
| Bedfordshire Service Wide Developments | | | | | | | | | | | | |
| Implementation of Day One plans | | | | | | | | | | | | |
| 2. Implementation of the Stakeholder Plan | | | | | | | | | | | | |
| 3. Agree scope of the Bedfordshire Partnership Board with CCG and Bedford and Central Bedfordshire Borough Councils and establish the Board | | | | | | | | | | | | |
| 4. GP and primary care engagement | | | | | | | | | | | | |
| Consult with senior staff on the new vision for the service and secure their engagement in the redesign process | | | | | | | | | | | | |
| | | | | | | | | | | | | |



| YEAR ONE (2015/16) HIGH LEVEL MOBILISATION PLAN BEDFORDSHIRE MENTAL HEALTH AND WELLBEING SERVICES | Apr- | May- | Jun- | Jul- | Aug- | Sep- | Oct- | Nov- | Dec- | Jan- | Feb- | Mar- |
|---|------|------|------|------|------|------|------|------|------|------|------|------|
| Consult with all staff on the new vision for the service and agree the redesign process | | | | | | | | | | | | |
| 7. Six Month Review with staff | | | | | | | | | | | | |
| 8. Develop and consult on Organisational Development (OD) and Leadership Programme | | | | | | | | | | | | |
| Start implementation of OD Programme | | | | | | | | | | | | |
| 10. Consult on and establish the Quality Improvement Programme | | | | | | | | | | | | |
| 11. Start the Quality Improvement Programme | | | | | | | | | | | | |
| 12. Develop business case for new EPR and Clinical IT system | | | | | | | | | | | | |
| 13. Start deployment of new EPR and Clinical IT system | | | | | | | | | | | | |

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Central Bedfordshire Council

CHILDREN'S SERVICES OVERVIEW AND SCRUTINY COMMITTEE

28 January 2015

Work Programme 2015-16 & Executive Forward Plan

Advising Officer: Paula Everitt (<u>paula.everitt@centralbedfordshire.gov.uk</u>)

Purpose of this report

The report provides Members with details of the currently drafted Committee work programme and the latest Executive Forward Plan. It also updates Members on recent conversations resulting in the refresh of the work programme.

RECOMMENDATIONS

The Committee is asked to:

- 1. Consider and approve the work programme attached, subject to any further amendments it may wish to make;
- 2. Consider the Executive Forward Plan; and
- Consider whether it wishes to add any further items to the work programme and/or establish any Task Forces to assist it in reviewing specific items.

Overview and Scrutiny Work Programme

- At previous meetings the Committee has expressed a desire to focus on its work programme so that it provides a balance of those items on which the Executive would be grateful for a steer in addition to those items that the Overview and Scrutiny Committee (OSC) wishes to proactively scrutinise.
- 2. The Overview and Scrutiny Co-ordination Panel has recently agreed a number of key principles relating to ways of working, these include:-
 - Minimising duplication
 - Focusing on requested items
 - Focusing on outcomes and the 5-year plan
- 3. In addition to focusing on outcomes it was agreed to restructure the agenda into three sections based on the focus of the 5-year plan. Future agendas will be separated into four sections to permit a clear focus on the priorities of the 5-year plan as follows:
 - a. cross-cutting matters:

- b. protecting vulnerable children;
- c. promoting children's health; and
- d. education and skills.
- 4. In light of these principles the revised work programme is attached at **Appendix A**. The Committee is requested to consider the work programme and the indicated outcomes and to amend or add to it as necessary. Also enclosed at **Appendix B** is a list of reports where other bodies are accountable for performance or the committee has little influence over a report that will be considered in public elsewhere and have been removed from the work programme.

Overview and Scrutiny Task Forces

5. In addition to consideration of the work programme, Members may also wish to consider how each item will be reviewed, i.e. by the Committee itself (over one or a number of Committee meetings) or by establishing a Member Task Force to review an item in greater depth and report back its findings.

Executive Forward Plan

6. Listed below are those items relating specifically to this Committee's terms of reference contained in the latest version of the Executive Forward Plan. The full Executive Forward Plan can be viewed on the Council's website at the link at the end of this report.

| Item | Indicative Exec Meeting date |
|---|---------------------------------|
| New Lower School Places in Stotfold | 05 April 2016 |
| Non Key Decisions | Indicative Exec Meeting date |
| Budget 2016/17 and Medium Term Financial Plan, Capital Programme 2016/17 to 2019/20 and HRA Plan | 9 February 2016 |
| Q3 Revenue, Capital and HRA | 9 February 2016 |
| Q3 Performance | 05 April 2016 |

Corporate Implications

7. The work programme of the Children's Services Overview & Scrutiny Committee will contribute indirectly to all 5 Council priorities. Whilst there are no direct implications arising from this report the implications of proposals will be details in full in each report submitted to the Committee.

Conclusion and next Steps

8. Members are requested to consider and agree the attached work programme, subject to any further amendment/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. 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.

9. Following the initial meeting to review the OSCs work programme it is intended to review this approach following the Overview and Scrutiny meeting in March 2016.

Appendices

Appendix A Children's Services OSC Work Programme. **Appendix B** Items being considered elsewhere that may be of interest

Background Papers

Executive Forward Plan (can be viewed at any time on the Council's website) at the following link:-

http://centralbeds.moderngov.co.uk/mgListPlans.aspx?RPId=577&RD=0



| Appendix A | DRAFT | |
|---------------------|--|---|
| Social Care, Health | and Housing OSC Work Programme (2015/16) | |
| OSC date | Report Title | → Description |
| 21 March 2016 | Specialist Commissioning | Report on change in policy with details on spend and delivery currently commissioned by NHS England |
| 21 March 2016 | Winter Resilience - Overview | BCCG report as to the effectiveness of the winter resilience plan 15/16. |
| 21 March 2016 | Q3 Budget Monitoring | To consider the Q3 budget monitoring report |
| 21 March 2016 | Central Bedfordshire's Policy for Housing Assistance 2016-2020 | To adopt the Council's Policy for Housing Assistance 2016 – 2020 for providing households with financial assistance to improve the homes of the most vulnerable households. |
| 21 March 2016 | EEAT performance update | To scrutiny the EEAT performance report and comment. |
| 21 March 2016 | Quality and safety of patients | BCCG report on procedures and link with hospital Quality Accounts |
| 21 March 2016 | Excess Weight Services Strategy and Contract | To consider and comment on the new strategy and contract and provide feedback on future priorites. |

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