
Meeting: Social Care Health and Housing Overview & Scrutiny Committee
Date: 28 June 2010
Subject: The Recovery and Improvement of Adult Social Care Services

Report of: Cllr Mrs Carole Hegley, Portfolio Holder for Social Care & Health

Summary: This report is to inform Members of the significant progress made in the Recovery Programme to date and proposals for assuring sustained improvement through the establishment of a second phase to the programme

Contact Officer: Director of Social Care, Health and Housing

Public/Exempt: Public

Wards Affected: All

Function of: Council

CORPORATE IMPLICATIONS

Council Priorities:

The Recovery Programme is essential for the delivery of responsive adult care services, as failure to deliver on this programme will significantly impact our ability to deliver these services. It contributes towards improving the quality of life of all in Central Bedfordshire, specifically by:

- Supporting and caring for an ageing population
- Creating safer communities

Financial:

Extensive work on Adult Social Care budgets has been completed as part of the recovery programme, concluding in a revised budget for 2010/11. As milestones are developed for Recovery phase 2, financial implications will be determined.

Legal:

There are no legal implications as a result of this report

Risk Management:

The Councils overall reputation and performance assessment would be at risk if it is not aware of the challenges presented by the performance of its adult care services

Staffing (including Trades Unions):

There are no staffing implications as a result of this report

Equalities/Human Rights:

There are no equalities/human rights implications as a result of this report

Community Safety:

There are no community safety implications as a result of this report

Sustainability:

There are no sustainability implications as a result of this report

RECOMMENDATION(S):**1. That the committee:-**

- **Note the progress made in implementing the Adult Social Care Recovery Programme**
- **Note the proposals for a second phase of the Recovery Programme**

Progress Update

1. The Recovery Programme was established in October 2009 to take adult social care to safe, sustainable service delivery in the key areas of concern, from where the improvement journey can begin. This was a strategic initiative to deploy focussed, prioritised resources to ensure a rapid improvement in service delivery, so that Central Bedfordshire adult care services are made safe. The Recovery Programme was shared with the Care Quality Commission and the Government Office, who were in support of the approach taken.
2. After consideration, eleven recovery areas were identified, nine of which have now been successfully closed, and the last two will be completed, and the programme closed, before the end of June. Out of sixty nine milestones identified, sixty five have been completed. Details are below:

| 3. Recovery Area | Progress |
|-------------------------|---|
| Safeguarding | Closed 7 th June 2010. We have focussed intensively on staff and managers to deliver improved practice and outcomes for people who are the subject of a safeguarding concern. Audits have shown practice to be significantly improving. |
| Mental Health Services | Closed 7 th June 2010. Close working with our mental health provider has been the focus in this area, and performance measures have been settled upon, supported by regular reporting to the performance management board. A new section 75 agreement has been agreed. |

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|---------------------------------|---|
| Carers | Due to close end June 2010. Steady progress has been made, with NI35 (carers receiving needs assessment or review, and a specific carers service, or advice and information) performance at end of April 2010 standing at 22.3%. |
| Commissioning | Closed 7 th June 2010. The aim of this workstream was to have expertise and capacity in place to deliver commissioning strategies. Staff training was integral to effective delivery and this has proved effective. Prevention strategy has been agreed. |
| Managing the social care market | Due to close end June 2010. We wanted to ensure contract managers had the skills to effectively manage adult social care contracts and ensure compliance and that we had a secured contractual arrangement around the BUPA provision. An audit of contracts has been completed and negotiations with BUPA are proceeding, with an outline agreement now been reached. |
| Workforce strategy | Closed 18 th March 2010. A cross sector workforce strategy has been agreed. |
| Staffing arrangements | Closed 7 th June 2010 We have focussed on recruiting to key management and operational posts, and have delivered management training to all operational team managers. |
| Partnerships | Closed 26 th April 2010. Governance arrangements have been approved for delivery partnerships within Healthier Communities and Older People, with regular meetings focussed upon a work plan to deliver outcomes in 2010/11, agreed and set out in an overarching plan, signed off by the HCOP and the LSP. |
| Performance Management | Closed 26 th April 2010. Managers now own and understand performance information better and use it to manage and take timely corrective action. |
| Budget | Closed 26 th April 2010. Budget position and forecast have been agreed as accurate by the Executive. |
| Financial Management | Closed 7 th June 2010. Significant progress has been made in the development of the budget and financial management framework. A finance action plan has been developed. |

4. The Recovery Programme Board is chaired by the Chief Executive and includes senior adult social care and corporate officers. The Members Reference Group, including the Portfolio Holders of Adult Social Care and Health, Finance, the Leader and Deputy Leader, have received bi-monthly updates on progress and been supportive of the work completed and the achievements of the recovery programme. The Recovery Board have met nine times to date, and the Members Reference Group have met five times.
5. Lessons learnt include:
 - The importance of the Chief Executive and Senior Manager stewardship of the programme
 - Members oversight and support through the Members Reference Group
 - Benefits of fully engaging with all staff
 - Corporate services need to be fully engaged in the process and have the capacity to support
 - Need to build a performance culture focussed on practice and standards
 - Care Homes are “adequate”, but they need to move to “good”
 - Safeguarding is “adequate” but not established
 - Financial and business systems are not robust enough to drive efficiencies and devolve the budget
 - The current care market still does not meet our needs and more work is required with suppliers and to shape a new market
 - Organisational capacity to deliver was a significant challenge, some of which was alleviated through the availability of improvement monies provided by the Government Office, the Department of Health and the Joint Improvement Partnership
 - Need for focussed programme management
 - Whilst there have been significant improvements there needs to be a continued focus to ensure they remain sustainable

Proposals

6. As the first phase of the Recovery Programme draws to a close, 5 key areas of risk to sustaining improvement have subsequently been identified, leading to a proposal for Recovery Phase 2, incorporating:
 - i. Practice, standards and performance. This would include: mental health, case recording, carers, target setting, management competencies, workforce development and quality of care services. This would cover both in house and externally provided services.

- ii. Safeguarding. This would include ensuring that good practice is embedded and maintained
 - iii. Integrated finance and Business Processes. This would include ensuring that our business processes are fit for purpose and that our data systems are fully aligned, to enable devolved financial management at budget manager level
 - iv. Stabilising and managing the adult social care market. This would include establishing safe and effective contracts, as well as establishing the conditions where personalised support will flourish i.e. BUPA contract, Homecare block contracts, and contract with South Essex Primary Trust.
 - v. Transforming Peoples Lives. This would include ensuring that key risks identified in the TPL Programme are managed and supported, i.e. resource allocation, and managing the front end of customer contact.
7. A longer term focus over the next twelve months in these areas should provide the foundation for improvement across adult social care. The Recovery Programme Board has agreed the commencement of Recovery Phase 2 in principal and it is proposed that each area is now scoped in detail to determine key deliverables and milestones.

Resources

- 8. The Recovery Programme focussed the improvement monies available from GO East, the Joint Improvement Partnership and CSED assistance to key areas of concern: safeguarding, mental health services, budget, workforce strategy, contracting and business processes. Further external support, in the form of improvement funds from the Government Office, is being sought.
- 11. Internal support is through existing resources. Further work is needed to determine support capacity once the briefs have been agreed and key deliverables and milestones have been fully scoped.

Conclusion

- 12. There has been significant progress made in the recovery of adult social care services in our first year as a Council. Focus now needs to be concentrated on sustaining this improvement through phase 2 of the Recovery Programme.

Appendices:

None

Background Papers: (open to public inspection)

- 1. Report to Social Care Health and Housing Overview and Scrutiny Committee entitled "Update on the Recovery and Improvement of Adult Social Care Services", on 10th September 2009
- 2. Report to Executive on "The Recovery and Improvement of Adult Social Care Services" on 18th August 2009

3. Directorate presentation to Social Care Health and Housing Overview and Scrutiny Committee on 16th July 2009

Location of papers: Priory House, Chicksands