Adults & Communities – Q4 2015/16

1. SUMMARY

1.1 DELIVERY UNIT DASHBOARD

Financial	
Projected year-end revenue budget variance	**Capital actual variance**
2,835	(472)

	Performance	Commissioning Intentions
Green rated	**43% (9)**	**100% (6)**
Green Amber rated	**14% (3)**	**0% (0)**
Red Amber rated	**0% (0)**	**0% (0)**
Red rated	**43% (9)**	**0% (0)**

1.2 TOP ACHIEVEMENTS AND ACTIONS

Top Achievements
1. Successful delivery of preventative services – Adults & Communities installed over 880 telecare packages in 2015/16, more than double the target for the year.
2. Continued development of assessment hubs – a new delivery model, improving access to preventative services for new clients as well as dealing with people's needs more efficiently and reducing waiting times for assessments.
3. Implementation of a new staffing structure, changing the skills mix in the Delivery Unit, setting the foundations for the strengths-based approach to be implemented in 2016/17 as well as realising a substantial financial saving.

Key Challenges	Actions required
1. Delivering an effective financial response to demand pressures	Continued delivery of transformation activity to intervene early and mitigate demand pressures as much as is possible
2. Maintaining staff productivity and morale	Development of strengths-based working model to expand staff skills and capacity; continued embedding of new organisational structure.
3. Scale and pace of change activity over coming year	Business planning and service planning exercises to identify upcoming issues and plan early and coordinated responses to these

1.3 SUMMARY OF THE DELIVERY UNIT'S PERFORMANCE

Adults & Communities has not seen substantial movement in performance over the last quarter. Most areas of strong performance at Q3 remain strong at Q4 – residential admissions for working age adults are still low at a rate of 10.63 per 100,000 against a target of 13.4; preventative services such as enablement and the overall rate of telecare installations are performing well, with the percentage of people leaving enablement without a care package improving to 73% against the 63% target and the number of telecare installations more than double the target at 889.

A number of productivity measures (numbers of assessments and review events) have improved in the last quarter but not to the extent seen in previous years. Because of this the outturn for the proportion of clients reviewed has fallen short of the projection in previous quarters and is at just over 62% at year end.

The year has seen substantial change within the DU and this has presented challenges for Adults & Communities in maintaining staff productivity and morale. The DU has implemented a significant organisational restructure to deliver required workforce savings, while holding high vacancy levels to help meet the financial challenge. In addition, the Mosaic system implementation has experienced repeated delays. These have created disruption and ongoing uncertainty and have prevented the DU from realising the expected benefits of the system in terms of improved ways of working. As a result, the present challenges around systems access, data quality and management information has persisted throughout the year and will continue into 2016/17, along with the significant resource commitments required from Adults to support the implementation.

Against this, performance has remained broadly stable and the vast majority of commissioning commitments have been delivered, with all commissioning intentions rated green at year end. Major new services have been procured, including Personal Assistants and the new homecare framework, ready for implementation in 2016/17. Customer satisfaction measures (support plan outcomes met at review; customer services feedback) remain high (at 95% against the 90% target and 100% against the 85% target respectively). A range of practice quality improvements have been implemented including a case audit programme and a number of reviews of referral pathways with actions taken to resolve the issues identified. Q4 also saw a visit from the Chief Social Worker for England, who gave positive feedback on the services she visited, on Barnet's overall approach and our plans for the coming year.

2. Performance

2.1 How the Delivery Unit is performing against its performance indicators

	RAG						Direction of Travel			No. of indicators expected to report this quarter
	Green	Green Amber	Red Amber	Red	Total RAG ratings	Monitor	Improving or the same	Worsening	No Direction of Travel	
Strategic	7	2	0	4	13	4	7	6	4	17
Critical	2	1	0	5	8	7	3	5	7	15
Overall	**43% (9)**	**14% (3)**	**0% (0)**	**43% (9)**	**100% (21)**	**34% (11)**	**48% (10)**	**52% (11)**		**32**

2.2a Performance Indicators that did not meet their target

Appendix A outlines the indicators which have met their target.

Ref	Indicator description *Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan*	Type of indicator	Period Covered *Timeframe data has been measured*	Previous Result *Previous result from the most relevant period Q3 2015-16*	Target *Achievement level expected*	Numerator and Denominator *Relevant number that achieved the level required by the indicator out of total for indicator*	Result *Most recent result of the indicator measurement*	Target Variance *A calculation of how far the outturn is from the target*	Direction of Travel *An assessment of whether performance has improved since the previous results*
AC/S4	Percentage of adults with learning disabilities in paid employment	Strategic	Apr 2015 - Mar 2016	9.5%	10.6%	68/742	9.2%	13.5%	Worsening
AC/S5	Percentage of adults with mental health needs in paid employment	Strategic	As at 31 March	5.4%	7.0%	34/711	4.8%	31.7%	Worsening
AC/S9	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	Strategic	Apr 2015 - Mar 2016	292.8	399.0	N/A	426.55	8.4%	Worsening
AC/S16	Proportion of people with a Direct Payment	Strategic	As at 31 March	39.5%	41.0%	1036/2582	40.1%	2.1%	Improving
AC/S18	Percentage of Service users receiving on-going services with telecare	Strategic	Apr 2015 - Mar 2016	12.0%	17.0%	594/4681	12.7%	25.4%	Improving
AC/S21	Carer assessments resulting in information, advice and services (end of year projection)	Strategic	Apr 2015 - Mar 2016	949	1948	N/A	946	51.4%	Worsening

Ref	Indicator description *Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan*	Type of indicator	Period Covered *Timeframe data has been measured*	Previous Result *Previous result from the most relevant period Q3 2015-16*	Target *Achievement level expected*	Numerator and Denominator *Relevant number that achieved the level required by the indicator out of total for indicator*	Result *Most recent result of the indicator measurement*	Target Variance *A calculation of how far the outturn is from the target*	Direction of Travel *An assessment of whether performance has improved since the previous results*
AC/C1	Total non-elective admission in to hospital (general & acute) all-age, per 100,000 population	Critical	Apr 2015 - Mar 2016	5237	7333	N/A	8292	13.1%	Worsening
AC/C7	Percentage of DoLS applications completed within statutory timeframes	Critical	Apr 2015 - Mar 2016	10.0%	100.0%	N/A	9.0%	91.0%	Worsening
AC/C10	Percentage of clients receiving an on-going package of care reviewed (end of year projection)	Critical	Apr 2015 - Mar 2016	64.4%	75.0%	N/A	62.23%	21.6%	Worsening
AC/C11	Average Number of days from contact to end of assessment	Critical	Apr 2015 - Mar 2016	24.9	18.0	N/A	24.2	34.7%	Improving
AC/C12	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	Critical	Apr 2015 - Mar 2016	7.0	5.8	N/A	7.5	29.3%	Worsening

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AC/C13	Number of delayed transfers of care from hospital, and those which are attributable to adult social care per 100,000 population	Critical	Apr 2015 - Mar 2016	2.7	2.5	N/A	3.3	32.0%	Worsening

2.2b Comments and proposed interventions for indicators which did not meet target

All indicators are at intervention level 1.

Ref and title		Comments and Proposed Intervention
AC/S4	Percentage of adults with learning disabilities in paid employment	The actual number of adults with learning disabilities in employment has decreased by 1 over the quarter (from 69 in Q3 to 68 in Q4); the size of the percentage decrease is due to a higher overall caseload (from 728 in Q3 to 742 in Q4). A review of the data we hold on LD accommodation has taken place and a number of records have been corrected. A commissioning lead for workplace inclusion has been appointed to develop the supported employment offer in the borough for both LD and MH and is currently identifying service users who might benefit from the programme.
AC/S5	Percentage of adults with mental health needs in paid employment	See AC/S4 above.
AC/S9	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	A significant spike in admissions was seen in November (Q3) and while the rate was brought down consistently across the remainder of the year this was not enough to return the DU below target. Work is beginning to roll out Barnet's integrated locality team approach across the borough and develop its preventative focus, including provision of care navigators to promote earlier access to preventative services.
AC/S16	Proportion of people with a Direct Payment	The percentage of service users with a direct payment has increased on Q3 though still falls short of the target by a real terms margin of approximately 20 people. Panel continues to ensure DP options are considered in all cases although these are not appropriate for every service user. Work has also been carried out to ensure direct payments are being spent appropriately. Barnet remains a strong performer against this indicator with 40% of service users receiving a DP last year against 28.4% for our statistical neighbours as well as the national average of 26.3%.
AC/S18	Percentage of Service users receiving on-going services with telecare	The Adults' transformation programme is identifying new opportunities to promote telecare in addition to the additional advisor already employed within the Delivery Unit, potentially focusing on supported living and residential care service users. The Council installs some telecare packages for current service users and some telecare packages for people who do not use Council services and where the Council does not maintain the equipment (either because it does not require maintenance or because the recipient funds the package themselves). The rationale for this is because telecare is a preventative service which can have benefits in delaying the need for more intensive services. Telecare is purchased through an IT system not owned or controlled by the Council and as a result the data the Council receives on new installations does not allow us to match it against our own records and identify which of the installations are for current service users. This is the data which informs AC/S17 (number of telecare packages installed). The number of telecare packages installed during the year (AC/S17) is more than double the target. This includes standalone and self-funded packages not counted towards this percentage target and which support service users without an ongoing cost to the

Ref and title	Comments and Proposed Intervention
	Council. The data for AC/S18 is drawn directly from the Swift case management system but as a result only covers the installations that the Council funds and maintains for current service users. The number of these installations is lower than the total number of packages installed by the Council and as a result the indicator shows lower performance. Plans are under way to look at how these datasets can be reconciled in the future once the new case management system is in place.
AC/S21 — Carer assessments resulting in information, advice and services (end of year projection)	The final outturn for carers' assessments is only 3 fewer than in 2014/15 (946 against 949 in 2014/15) though a substantial fall on the 1948 carried out in 2013/14. The ongoing low staffing levels in Adults & Communities continue to have an impact on the Delivery Unit's capacity to carry out carers' assessments alongside other priority activities such as reviews. Staff education sessions are being run with carers' service providers to increase understanding of carer needs and the carers' assessment forms are being redesigned to make them more user-friendly as part of the implementation of the DU's new case management system.
AC/C1 — Total non-elective admission in to hospital (general & acute) all-age, per 100,000 population	Admissions in Q4 are approximately 10% higher than in the same period last year, though national statistics show that there is consistently high pressure on the NHS across England this winter with the waiting lists for urgent and emergency care standing at record highs. Plans are in place for the coming year to scale up preventative activities such as home adaptations and falls prevention advice in order to reduce admissions, delivered through the neighbourhood services model as well as by joint working with the NHS through Barnet's integrated locality teams.
AC/C7 — Percentage of DoLS applications completed within statutory timeframes	The volume of DoLS applications remains consistently high at Q4 and the total number of applications in 2015/16 is a 108% increase on last year. The total number of applications received in 2014/15 was 640 and the total number received in 2015/16 was 1357. This is driven significantly by the disproportionately large number of care home places in the borough – over 100 homes. The proportion of DoLS applications processed within the statutory timeframes in 2015/16 was 8%. Data on the timeliness of the decision was not part of the statutory return in 2014/15 and Adults started to collect this mid-year. As a result the service holds data for only part of the year and for that period the data is also incomplete. The service continues to struggle to meet demand. The DU is continuing workforce development activity to increase the number of social workers qualified as Best Interest Assessors (BIAs) and is introducing a BIA rota from May 2016 onwards to manage the pressures on the service.

Ref and title		Comments and Proposed Intervention
AC/C10	Percentage of clients receiving an on-going package of care reviewed (end of year projection)	The proportion of clients reviewed in the quarter remained lower than in the final quarter of previous years and did not meet the projection at Q3. However, the number of review events in Q4 is an increase of more than 35% on Q3. The increased reviewing capacity funded through the Adults' transformation programme resource became available in mid-February and did not therefore have an impact across the full quarter, but should increase the numbers of reviews achieved in the first quarter of 2016/17.
AC/C11	Average Number of days from contact to end of assessment	Waiting times are showing a small but sustained decrease quarter on quarter. There have been initiatives to ensure active caseloads are accurate and appropriate and to increase capacity to address the needs of incoming clients, with case audits and closures actively discussed in line management meetings. The Delivery Unit is also developing the second phase of its 'assessment hubs' programme which aims to make the process of assessment more efficient as well as giving new service users access to a greater range of preventative services. However, the current low staffing levels continue to have an impact on productivity and the DU continues to have to prioritise its activities.
AC/C12	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	Both joint and social care delays have increased substantially on Q3. The Delivery Unit continues to experience difficulties as lack of capacity in the provider market creates issues with placing people, while the NHS is experiencing record levels of pressure in winter 2015/16 (see AC/C1 above). A diagnostic review of the hospital and front door referral pathways has been carried out and action plans put in place to improve them.
AC/C13	Number of delayed transfers of care from hospital, and those which are attributable to adult social care per 100,000 population	See AC/C12 above.

3. Commissioning Intentions

Theme committees have agreed the commissioning intentions for the council up to 2020; the tables below provide an update on the progress.

3.1 Overview of progress against Commissioning Intentions

RAG ratings					No. of Commissioning Intentions
Green - Met	Green Amber - delayed, Low Impact	Red Amber - delayed, Medium Impact	Red - Risk of Not Delivering Or High Impact	Not Rated (Not due or N/A)	
29% (6)	0% (0)	0% (0)	0% (0)	71% (15)	21

3.2 Commissioning Intentions

This section below outlines the Commitments which were due to be completed this quarter.

RAG	Description
Green	Commitment Met
Green Amber	Commitment delayed, Low Impact
Red Amber	Commitment delayed, Medium Impact
Red	Risk of Not Delivering Or High Impact

Commissioning Intentions	Status	Comments
Work effectively with individuals and their families to enable moves out of residential care. To develop move on plans for all those assessed to have potentials to step-down	Green	Working age adults' residential admissions remain low and the stable accommodation indicators are performing strongly for both LD and MH service users.
Support implementation of the WLA mental health and employment trailblazer and public health employment support initiatives	Green	Work has been undertaken with commissioning leads to identify relevant service users and signpost them into the schemes.

3.3 Annual Commissioning Intentions and Commitments

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
AC16	Commission high quality flexible specialist home support services including personal assistants (PAs)	Develop a PA strategy to increase the number of PAs in Barnet	Jun-15	1	2015/16	Green - Met	Green	New service to go live in Q1 2016/17.
AC12		Develop a workforce strategy	Nov-15	3	2015/16	Green - Met		
AC26	Develop a more creative and cost effective review and support planning and process and ensure this considers how equipment and technology can increase independence	Implement Social Care Direct. Implement new enablement and review of pathways (excluding mental health). Ongoing monitoring, management and review of new model ensuring benefits and performance targets are achieved.	Apr-15	1	2015/16	Green - Met	Green	Social Care Direct is live and work continues to review and improve referral pathways.

Work to reduce the number of working age adults in residential care has continued throughout the year and shown success in reduced admissions and improved LD and MH accommodation indicators. |
| AC28 | | Deliver the Private Rented Sector Project by clearly defining requirements and utilising placements created. | Oct-15 | 3 | 2015/16 | Green - Met | | |
| AC29 | | Continue to prioritise move on for Winterbourne cases. | Oct-15 | 3 | 2015/16 | Green - Met | | |

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
AC27		Work effectively with individuals and their families to enable moves out of residential care. To develop move on plans for all those assessed to have potentials to step-down	Mar-16	4	2015/16	Green - Met		
AC35	Develop the employment support offer for adults with learning disabilities and ensure there are sufficient employment opportunities available in the Borough	Inclusion of social value employment clauses in contracts where appropriate	Apr-15	1	2015/16	Green - Met	Green	Work will continue in 2016/17 to support the commissioning lead for workplace inclusion in developing this offer further.

Work has been undertaken to identify cohorts eligible for work with the Burnt Oak jobs team. |
AC40		Information and advice services	Jun-15	1	2015/16	Green – Met		
AC36		Identify the potential to increase the proportion of adults with learning disabilities in employment	Sep-15	2	2015/16	Green Amber - delayed, Low Impact	Green	As above
AC37		Development of a plan for LD employment (with Regeneration and Growth portfolio and CSG) including social value procurement, LD employment pathway, carved roles/ work	Sep-15	2	2015/16	Green		

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
		placements in the Council and with partners including JCP and PH.						
AC51	Ensure the voice of people who use adult social care and carers contributes to the design and delivery of services	Review the effectiveness of the Partnership Boards (with CG – HWBB).	Sep-15	2	2015/16	Green - Met	Green	Review completed and new engagement model launches Q1 2016/17.
AC55	Establish a new 0-25 disabilities service (learning, physical disabilities; sensory impairments, mental health needs; complex needs) model to improve service quality and to promote increased independence of young adults and reduced costs to adult social care.	0-25: Lead consultation and engagement within Adults and Communities, including with directly affected staff	Sep-15	2	2015/16	Green - Met	Green	New service is live as of Q3 and being delivered by Family Services.
AC57		0-25: Timely and sufficient senior management and practitioner input to cohort review for savings delivery for this service	Sep-15	2	2015/16	Green - Met		
AC59		0-25: Professional advisor role (facilitate staff engagement in model development and provide practice expertise) and support provision of data.	Oct-15	3	2015/16	Green – Met		

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
AC60	Establish a new 0-25 disabilities service (learning, physical disabilities; sensory impairments, mental health needs; complex needs) model to improve service quality and to promote increased independence of young adults and reduced costs to adult social care.	0-25: Work Closely with Commissioning Group and Family Services to agree new pathway from 0-25 service to adult services	Oct-15	3	2015/16	Green - Met	Green	As above
AC61		0-25: Adapting to the new model of delivery from autumn 2015	Oct-15	3	2015/16	Green - Met		
AC70		Identify individual suitable for supported living and independent housing opportunities and also nominate individuals for HRA build schemes	Oct-15	3	2015/16	Green Amber - delayed, Low Impact		
AC77	Review delivery models to ensure that the social work service for working age people with mental health issues can best focus on the quality of services and strengthen the voice of both workers and service users.	Support implementation of the WLA mental health and employment trailblazer and public health employment support initiatives	Mar-16	4	2015/16	Green - Met	Green	MH employment services are embedded in social work teams and caseworkers actively refer clients to the WLA trailblazer.
AC87	Stimulate the market to encourage providers to effectively focus on enablement and personal development	Inform the MPS through our market and provider intelligence and quality / risk assessment	May-15	1	2015/16	Green - Met	Green	Data and intelligence provided to inform MPS.

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
AC112	To prioritise meeting the needs of carers, including young carers, through the assessment and support planning process by better supporting carers' own physical and mental health needs to ensure carers feel able to continue to support an individual for as long as they can.	Strengthened carer focussed approach implemented as part of the Care Act implementation.	Sep-15	2	2015/16	Green - Met	Green	New carers' strategy to go live in Q1 2016/17 with new dementia specialist team in place, HR policies and staff engagement to improve practice, and commissioning of new carers' service provider.
AC113	To prioritise meeting the needs of carers, including young carers, through the assessment and support planning process by better supporting carers' own physical and mental health needs to ensure carers feel able to continue to support an individual for as long as they can.	Carers strategy development and implementation with Family Services	Sep-15	2	2015/16	Green - Met	Green	As above.
AC116	To strengthen the current carers' support offer e.g. assistive technology, intensive support for carers of people with dementia.	Full analysis of how carers' offer	Sep-15	2	2015/16	Green - Met	Green	As above
AC120	To test and implement an Integrated Locality Team model across health & social care; targeted at older adults and focusing on the those identified through risk stratification	Play a key role in the development and testing of integrated locality teams with partners to shape final model and longer term roll out.	Sep-15	2	2015/16	Green - Met	Green	BILT team running throughout the year and now preparing for cross-borough rollout in 2016/17.

Ref	Intention	Commitment	Due Date	Quarter	Year	Status	Overall Status (Annual Position)	Comments (Annual Position)
AC121	(and other mechanisms) as at risk of hospital admission and/or escalating social care needs/costs	Integrated Locality Team: Ensure social care requirements are met - benefits identification and delivery	Sep-15	2	2015/16	Green – Met		
AC122		Integrated Locality Team: Ensuring a quality service is developed and delivered	Sep-15	2	2015/16	Green – Met		

4. Financial

4.1 Revenue

Description	Variations				Comments	% Variation of revised budget
	Original Budget £000	Revised Budget £000	Actuals £000	Outturn Variation £000		
Care Quality	1,062	1,074	994	(80)	Underspend mainly due to contract savings	-7.4%
Community Safety	-	-	0	0		0.0%
Community Wellbeing	(1,064)	392	374	(18)	Underspend in relation to supplies and services	-4.6%
Customer Care	748	346	271	(75)	Underspend due to part year vacant posts	-21.7%
Customer Finance	786	825	791	(34)	Over-achievement of income for receivership and appointeeship services	-4.1%
Director - Adult Services & Health	185	188	165	(23)	Underspend in relation to staffing	-12.2%
Integrated care - Learning Disabilities & Mental Health	38,535	41,021	42,175	1,154	The care budgets overspent in 2014/15 as a result of rising demand for services. This meant that the budgets started the 2015/16 year in an overspent position, with a full year impact of increased demand heightening the problem. In 2015/16, demand continued to grow. The main pressure for learning disabilities continued to be in relation to clients transitioning from children's services with increasingly complex needs and correspondingly expensive packages of care. Mental health saw significant growth in client numbers requiring residential placements in 2014/15 but in 2015/16 there has been a significant diversion to supported living placements that offer better outcomes and better value for money. The position was offset by significant underspends in relation to staffing.	2.8%
Integrated Care - Older People & Physical Disabilities	35,610	36,553	39,166	2,613	The care budgets overspent in 2014/15 as a result of rising demand for services. This meant that the budgets started the year in an overspent position, with a full year impact of increased demand heightening the problem. In 2015/16, demand continued to grow for older adults placements with a particular growth in clients with dementia requiring complex packages of care. There is also pressure on this budget due to clients who were self-funders whose funds have depleted and who are now the responsibility of the Local Authority. The position was offset by significant underspends in relation to staffing.	7.1%
Performance & Improvement	1,024	764	711	(53)	Underspend in relation to part year vacant posts	-6.9%
Prevention & Wellbeing	3,603	5,447	4,603	(844)	Underspend due to savings in third party contracts and part year vacant posts	-15.5%
Safeguarding	731	735	950	215	This overspend is due to an increase in activity in the Deprivation of Liberty Safeguards (DOLS) service as a result of Supreme Court judgements in 2014/15.	29.3%
Social Care Management	596	411	391	(20)	Underspend in relation to staffing	-4.9%
Total	**81,816**	**87,756**	**90,591**	**2,835**		3.2%

4.2 Capital

	2015/16 Latest Approved Budget	Additions/ (Deletions)	(Slippage) / Accelerated Spend	Outturn £000	Variance £000	% slippage of 2015/16 Approved Budget
Adults and Communities	4,449	2	(474)	3,977	(472)	-10.7%
Adults and Communities	**4,449**	**2**	**(474)**	**3,977**	**(472)**	**-10.7%**

5. Risk

The following is the 5 X 5 matrix 'heat map' highlighting the number of risks at a Directorate Level and where they are currently rated:

			IMPACT				
	SCORE		1	2	3	4	5
PROBABILITY	5	Almost Certain	0	0	1	1	0
	4	Likely	0	0	2		0
	3	Possible	0	0	0	2	0
	2	Unlikely	0	0	0	0	0
	1	Rare	0	0	0	0	0

The risk register lists those risks rated as 12 and above.

Risk Commentary for Delivery Unit:

- The DU's highly rated risks are the result of ongoing statutory provisions and/or medium term financial pressures; the overall risk profile remains consistent with Q3 and is unlikely to alter significantly in the near future.
- Structures are in place to monitor service risks, including Transformation Board and project risk management frameworks, as well as productivity and financial risk, and to ensure mitigating action is taken if these are off course.
- High volumes of DoLS present a continuing risk though implementation of' 'community DoLS' plans will reduce the level of risk of non-compliance in this service area.
- Business continuity and emergency cover plans continue to perform effectively. The Delivery Unit participated in the recent London-wide emergency planning exercise and received positive feedback. Business continuity plans are currently being reviewed to ensure they remain fit for future challenges.
- Other specific financial and risk management plans are described elsewhere in this report.

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
AS0007- Financial Financial management – the risk of increased demand and the inability to deliver all planned savings projects leading to overspends and erosion of the Council's minimum reserve position.	Major 4	Almost Certain 5	High 20	• SMT monitoring • Monthly leadership budget review. • Finance training for Managers • All savings targets have a saving owner, progress reported through Leadership team	Treat	Quarterly	Moderate 3	Likely 2	Medium/Low 6

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
Cause – lack of timely monitoring by senior management. **Consequence** – breach of financial regulations and overspend of budget.				• Regular meeting of Financial Sustainability Group • Integra controls and complementary staff training • Recovery plans have been drawn up • The Transformation Board is overseeing plans to achieve 16/17 savings					
AS0044 – Compliance Information governance - risk that the Directorate may not be appropriately safeguarding personal information or responding to queries from members of the public.	Major 4	Possible 3	Medium/High 12	• Delivery Unit Information Management and Governance Group addressing key issues as it progresses with its work programme. It has representation from Corporate Information governance group has been refreshed and meets once a month. • Statutory Officers Group (Governance responsibilities) • Caldicott Guardian	Transfer	Quarterly	Moderate 3	Unlikely 2	Medium/Low 6
AS0089 – Business Continuity Provider failure. The Care Act increases the current scope of the DU as it requires the Council to be the lead agency to make customers safe and enable the provision of care to be continued**.** **Cause/consequence:** The legislative requirement of the oversight of all care providers. This requires a change of approach and increasing demand upon the DU to monitor the risk across suppliers who are not contracted to the Council; this could lead to additional demands being placed on staff resources and increase budget pressure. It could increase the administration and use of A & C DU staff resources; plus increase	Moderate 3	Likely 4	Medium/High 12	Restructured Care Quality Team went live in April 2015 to ensure the DU is resourced appropriately. The Care Act is part of the A&C Transformation Programme. The DU is developing a strategic approach with care providers to ensure their BCP is robust and to mitigate the risk to the Council.	Treat	Quarterly	Moderate 3	Likely 4	Medium/High 12

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
the cost of care.									
AS0090 – Business Continuity The Care Act empowers self-funders to request the Council purchases care on their behalf due to the greater purchasing power of the Council. If many individuals wish to buy their care in this way then it is likely care providers will increase their care costs, be unable to provide care safely or cease to trade. **Cause/consequence:** The Care Act enables self-funders to request the Council to procure care on their behalf. The care providers, who provide competitive rates to Councils, may be forced to review their discounts and price model, leading to an increase in care costs. If current price models are retained then there is a probability the care provider will have issues regarding the standard / quality of care provided and / or cease to trade.	Moderate 3	Likely 4	Medium/High 12	The Care Act is part of the A&C Transformation Programme. Consultation with providers regarding the potential implications of the Care Act will be monitored / evaluated. The financial modelling will provide indicative costs.	Treat	Quarterly	Moderate 3	Likely 4	Medium/High 12
AS0091 – Reputational Changes to the Mental Capacity Act arising from a recent Court ruling has led to an increase in the number of DoLS (Deprivation of Liberty Safeguards) assessments required to be undertaken by LAs. **Cause/consequence:** Inability to meet statutory time frame as required under the Mental Capacity Act. Unauthorised deprivation of liberty for LBB placed clients. Financial - Increased pressure on service budgets.	Moderate 3	Almost Certain 5	High 15	• Daily and weekly performance monitoring. • Review of business process to ensure it is efficient but meets all the requirements identified within the Mental Capacity Act. • Identifying resources to provide a sufficient service. In addition increased resources to key areas to minimise the risk further.	Treat	Quarterly	Minor 2	Almost Certain 5	Medium/High 10

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
Financial - Increased risk of claims against the LA (est. £1m).									
AS0094 – Staffing and Culture Quality of service provision cannot be guaranteed, agency usage has gone down but the delivery unit is operating significantly under establishment. **Cause/consequence:** Previous recruitment to front line social work and occupational therapy posts has not succeeded to the level desired and this means with the additional requirement to provide client and carer assessments with the introduction of the Care Act then the situation is likely to increase the service's risk.	Major 4	Possible 3	Medium/High 12	Supervision and quality monitoring of agency workers. Prioritisation of assessment and review work.	Treat	Quarterly	Minor 2	Unlikely 2	Medium/Low 4

6. Equalities

Equalities description	Comments and Proposed Intervention
Consultation and engagement	Work on the Delivery Unit's new engagement framework is complete and the approach will be launched in Q1 2016/17. The framework will provide effective and representative routes for the views of service users to be taken into consideration. The Delivery Unit is currently undertaking its annual service user survey. Work has been carried out to ensure a statistically representative sample and ensure the survey is accessible. The results will provide a rich data source for equality analysis.

7. Customer Experience

Customer Experience description	Comments and Proposed Intervention
Front Door	Customer satisfaction scores for Social Care Direct remain high (99% at quarter end) and the percentage of calls resolved at first contact has improved over the course of the quarter from 44% to 55%. The service is experiencing lengthening call times and this is having some impact on the proportion of calls that are answered within 60 seconds. The Delivery Unit is continuing to work with the Council's web leads group to improve the web experience and will be participating in the corporate Customer Transformation Programme to explore different online access pathways for new clients.
FOIs	Adults received 34 FOIs in Q4, all of which were responded to within the statutory deadline. This takes the DU to a total of 145 FOIs for the year. In addition, the Delivery Unit received and responded to 24 Subject Access Requests and 13 other requests for disclosure of information.
Complaints	The DU received 33 complaints in Q4. 32 were straightforward and 1 complex. 8 were responded to within deadline, 21 outside deadline and 4 are yet to be completed. Work is underway to develop a complaints improvement plan to address the timeliness and quality of responses and reduce the number of complaints which are reopened.
Member Enquiries	The number of Member Enquiries increased from 11 at mid-Q3 to 14 at mid-Q4. 57% had been closed within target at mid quarter. The complaints improvement plan is also addressing how members' enquiries are monitored and actioned.

Appendix A

Performance indicators which have met or exceeded their target.

Ref	Indicator description *Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan*	Type of indicator	Period Covered *Timeframe data has been measured*	Previous Result *Previous result from the most relevant period Q3 2015-16*	Target *Achievement level expected*	Numerator and Denominator *Relevant number that achieved the level required by the indicator out of total for indicator*	Result *Most recent result of the indicator measurement*	Target Variance *A calculation of how far the outturn is from the target*	Direction of Travel *An assessment of whether performance has improved since the previous results*
AC/S3	Percentage of adults with learning disabilities who live in stable accommodation	Strategic	Apr 2015 - Mar 2016	61.81%	60.00%	472/742	63.61%	6.0%	Improving
AC/S6	Percentage of adults with mental health needs who live in stable accommodation	Strategic	Apr 2015 - Mar 2016	82.9%	75.0%	576/711	81.0%	8.0%	Worsening
AC/S8	Percentage of new clients, older people accessing enablement		Apr 2015 - Mar 2016	62.1%	50.0%	511/831	61.5%	23.0%	Worsening
AC/S17	Number of new telecare packages installed	Strategic	Apr 2015 - Mar 2016	637	430	N/A	889	106.7%	Improving
AC/S19	Proportion of people who leave enablement with no care package	Strategic	Apr 2015 - Mar 2016	72.4%	63.0%	821/1125	73.0%	15.8%	Improving
AC/S23	Number of people meeting their outcomes at support plan review	Strategic	Apr 2015 - Mar 2016	90.5%	90.0%	210/220	95.5%	6.1%	Improving

Ref	Indicator description *Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan*	Type of indicator	Period Covered *Timeframe data has been measured*	Previous Result *Previous result from the most relevant period Q3 2015-16*	Target *Achievement level expected*	Numerator and Denominator *Relevant number that achieved the level required by the indicator out of total for indicator*	Result *Most recent result of the indicator measurement*	Target Variance *A calculation of how far the outturn is from the target*	Direction of Travel *An assessment of whether performance has improved since the previous results*
AC/S25	Percentage of Social Care Direct customers who are satisfied or very satisfied with the Service they have received post resolution	Strategic		98.0%	85.0%	N/A	100.0%	17.6%	Improving
AC/C2	Proportion of people using social care who receive self-directed support	Critical	As at 31 March	99.5%	99.5%	2572/2582	99.6%	0.1%	Improving
AC/C14	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64	Critical	Apr 2015 - Mar 2016	6.38	13.40	N/A	10.63	20.7%	Improving

Appendix B

Performance indicators which have been monitored throughout the year.

Ref No.	Indicator description	Quarter	Period Covered	Previous Result	Target	Numerator	Denominator	Result
AC/S22	Number of safeguarding adults alerts (concerns)	4	Apr 2015 - Mar 2016	870	Monitor			1208
AC/S24	Overall Number of contact events into Social Care Direct	4	Apr 2015 - Mar 2016	44105	Monitor			58822
AC/S27	Percentage of customer contacts into Social Care Direct resolved at first point of contact	4	March 2016	61.0%	Monitor			1
AC/S28	Percentage of customer contacts into Social Care Direct passed to adult social care	4	March 2016	20.0%	Monitor			0
AC/C4	Percentage of concluded safeguarding referrals (enquiries) which were fully or partly substantiated	4	Apr 2015 - Mar 2016	42.9%	Monitor	160	384	0
AC/C5	Number of DoLS applications	4	Apr 2015 - Mar 2016	983	Monitor			1357
AC/C6	Number of DoLs granted	4	Apr 2015 - Mar 2016	662	Monitor			797
AC/C8	Number of assessments	4	Apr 2015 - Mar 2016	1623	Monitor			2364
AC/C9	Number of review events	4	Apr 2015 - Mar 2016	3710	Monitor			5697
AC/C16	Number of referrals to hospital social work teams	4	Apr 2015 - Mar 2016	571	Monitor			828