

Adult & Communities– Q3 2014/15

1.1 DELIVERY UNIT DASHBOARD

Revenue budget projected year end variance £000	Capital actual variance £000	Corporate Plan Performance	Management Agreement Performance
857	(4)	3	6

1.2 TOP ACHIEVEMENTS AND ACTIONS

Top 3 Achievements

The Weekend Social Work service in acute hospitals has resulted in faster discharge from hospital back into the community. Working across both hospitals, social workers have enabled 94 people to be discharged at the weekend this quarter.

Following feedback from service users we have updated the information on the Council's website about services and advice and this includes Social Care Connect, and information about support available for carers.

The Autumn Health & Wellbeing Board catch-up took place with over 80 people attending including service users, carers, voluntary sector, councillors and members of the Health and Wellbeing Board. Topics included reviewing the performance over the past year and introduction of the Care Act.

Key Challenges	Actions required
<p>The pressures on the delivery unit's budget remain, though work has been undertaken to review spend and identify recovery actions, demand pressures continue. There continues to be significant demand pressures over and above those budgeted for from older adults with dementia, young adults with learning disabilities transitioning to adult social care, transfer of ordinary residents to Barnet and an increase in the number of individuals previously funding their own care now becoming the responsibility of the Council. A recovery plan is in place but this is unlikely to return to an in-budget position by year end.</p>	<p>The recovery plan will be reviewed with delivery board.</p> <p>An impact analysis on the position for 15/16 is being undertaken and this will be worked through with the Deputy Chief Operating Officer and Commissioning Director.</p>
<p>The Delivery Unit has a large amount of change to implement in quarter 4 including final preparations for the Care Act, improvements to the front door and enablement processes and the go-live of a new case management / finance / electronic document management system system.</p>	<p>Transformation programme is already managing these projects.</p>
<p>Growing demand from older people with dementia – especially for nursing care – and for Deprivation of Liberty Safeguards assessments and reviews.</p>	<p>Joint commissioning team working closely with operations to identify suitable, cost effective local provision.</p> <p>Proposal for managing increased Deprivation of Liberty Safeguards demand has been developed.</p>

2. DELIVERING THE CORPORATE PLAN

2.1 How the Delivery Unit is performing against its Corporate Plan indicators

CPI NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target Achievement <i>level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
1001	Increase the percentage of eligible adult social care customers receiving self-directed support	Dec 14	99.1%	75%	$\frac{2,632}{2,641}$	99.7%	32.9%	Improving	83.9% LAPS Q2 2014/15 group average.
1002	Increase the percentage (and number) of eligible adult social care customers receiving direct payments	Apr 14 - Dec 14	31.23%	35%	$\frac{1,229}{3,957}$	31.1%	11.3%	Worsening	Non-comparable local indicator Qtr. 2 result 1155/3439
1003	Increase the number of carers who receive support services (includes information and advice)	Apr 14 - Dec 14	33.88%	30%	$\frac{1,261}{3,719}$	33.9%	13%	Improving	Non-comparable local indicator
1004	Reduce the number of younger adults in residential and nursing care	Dec 14	302	300	N/A	306	2%	Worsening	Non-comparable local indicator
1005	Increase the % of older people (65 and over) who were still at home 91 days after discharge from hospital into re-enablement/rehabilitation services	Not due to be reported this quarter							
1006	Increase the overall satisfaction of people who use adult social								

CPI NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
	care services with care and support								
1007	Increase % of adult social care service users who say their services have made them feel safe and secure								
1008	Increase in community confidence in police and the local authority dealing with crime and anti-social behaviour	Mar 14	67%	70%	N/A	68%	2.9%	Improving	Not yet established
1009	Maintain the level of the rate of proven adult reoffending	Apr 12 - June 12	24.00	22.00	N/A	17.4	99.2%	Improving	Most up to date National average rate in 12 months to March 2012: 25% (to nearest 1%)
1010	Maintain the reduction in the level of domestic burglary	Dec 13 - Nov 14	19.88	22	N/A	19.8	10%	Improving	London average for same time (Dec 13 - Nov 14): 15.2 Most Similar Group (MSG) average: 13.4

*The relevant previous outturn used will either be the previous quarter, or the same quarter of the previous year. The same quarter of the previous year will be used for annual indicators, cumulative indicators (where the numbers add up during the year and are reported as 'year to date') and if the indicator is affected by seasonal fluctuations.

2.2 Interventions & Escalations

CPI NO and title	Comments and Proposed Intervention
<p>1002 Increase the percentage (and number) of eligible adult social care customers receiving direct payments</p>	<p>We have continued to consider Direct Payments as the first choice of community packages, with an increase in DPs for Mental Health service users, and can demonstrate examples of the creative use of Direct Payments to support people achieve positive outcomes in the community such as funding activities to stay fit and well, access to training & creative day activities.</p> <p>The Community Offer Team have, following reviews, stopped some Direct Payments that were not being effectively used to meet eligible needs. The number of new starts is increasing month on month but because of this, the net impact is a reduction of DPs. The proportion of Direct Payments does vary by service and locality and work is underway to ensure best practice is followed across the delivery unit.</p> <p><i>Level 1 intervention</i></p>
<p>1004 Reduce the number of younger adults in residential and nursing care</p>	<p>A majority of the admissions to residential and nursing care relate to Mental Health services users with complex. Residential is only used if this is the most appropriate option for the individual. All residential packages are agreed with clear review dates. A Mental Health project is developing the social work model to ensure that the numbers in residential and nursing care falls as individuals are better enabled to live in the community.</p> <p><i>Level 1 intervention</i></p>
<p>1008 Increase in community confidence in police and the local authority dealing with crime and anti-social behaviour</p>	<p>The most recent Residents Perception Survey results available show that confidence has increased (from 67% in the Autumn 2014 survey to 68% in the Spring 2014 survey). Additionally since the Spring 2014 survey a number of significant activities have been undertaken by the Safer Communities Partnership which includes a focus on increasing community engagement and confidence. These include:</p> <ul style="list-style-type: none"> ○ The Community Safety Strategy Public Consultation (between July to October 2014) ○ Partnership day of action on September 25th 2014 involving hundreds of police, council and safer communities partners promoting the work of the Safer Communities Partnership ○ Launching the Barnet Community Trigger which provides a clear mechanism for residents to call for a review of an on-going repeat anti-social behaviour problem ○ Launched the Community Safety MARAC group which meets regularly, bringing together a wide range of partners to address long term and complex ASB cases <p><i>Level 1 intervention</i></p>

3. BUSINESS PLANNING

3.1 Overview of performance against Management Agreement

Total No. of KPIs	RAG ratings				Positive/neutral DoT	Negative DoT	No. of indicators expected to report this quarter
	Green	Green Amber	Red Amber	Red			
14	7	0	0	1	5	3	8

3.2.1 How is the Delivery Unit achieving against Commissioning Priorities

Commissioning Priority	Subjective RAG	Commentary
Implementation of the Care Act	Green	<p>Our Care Act project continues to deliver well. Some highlights include:</p> <ul style="list-style-type: none"> The Care Act preparations have been progressing according to plan. Having developed a number of the tools and approaches, we are undertaking a consultation exercise on key components in line with legal advice. Work is underway to ensure that the anticipated demand for information and assessments from carers is planned for at both the front door and in terms of undertaking required assessments. The Public Consultation on a Universal Deferred Payment scheme has closed and a new policy is being presented to the Adults and Safeguarding Committee in January 2015. A refresh of the Market Position Statement is in progress and plans are in development to ensure that we can fulfil the new duty to step in in case of provider failure. A new Workforce Capacity project has modelled the workforce required to meet anticipated increases in demand and has been working with the delivery unit and Social Care Direct (the public's first point of contact), to ensure that appropriate staffing is in place.
Delivery of health and social care integration including through the Better Care Fund	Amber	The Better Care Fund plan, as considered by the Health and Wellbeing Board in September 2014 and full council on the 4th November 2014, was approved by NHS England subject to one condition. This related to providing further assurance around the target to reduce emergency admissions. Additional work has been completed in

Commissioning Priority	Subjective RAG	Commentary
		<p>collaboration with a nominated Better Care Fund advisor and an updated plan was submitted for 9th January 2015. We await feedback from NHS England.</p> <p>Several elements of the integrated care model are now in operation and this now includes MDT case management, single point of access, risk stratification, and care navigation team. We also have in place community based integrated stroke and dementia support and are working on a shared care record.</p>
Ensuring the sufficiency and quality of the social care delivery workforce	Amber	A targeted recruitment drive for permanent staff has begun. For Care Act implementation ASC is reviewing professional core skills training in order to ensure that all staff have the relevant professional competence to carry out the DU priorities.
Delivery of the new vision for adult social care (including changes to the model for OP,LD,MH and carers and Care Act)	Amber	<p>The development and implementation of the new 'front door' model is progressing well and is on target to be operational by the beginning of April. The revised approach will improve the arrangements between Social Care Direct and the operational services to manage demand more effectively at the first point of contact. This initiative is aligned to the Care Act project for Prevention, Information & Advice and will ensure that better information and advice is available to customers, and that staff are able to signpost them to this.</p> <p>New processes and pathways have been developed to ensure that where relevant people asking for services are offered Enablement services. The development of new scripts, and are working with the Investing in IT project to ensure that maximum benefit can be derived from both initiatives. Next steps will be to identify those LBB staff that will work alongside SCD, and train all staff in the new model and on the new IT to ensure they are ready for April go live.</p> <p>Achieving timescales to go live from 1 April with front door, Care Act and IT will be challenging, hence the Amber rating.</p>
Ensure that there is clarity of responsibilities across the Safer Communities Partnership and Safeguarding Boards for a co-ordinated approach to address violence against women and girls.	Green	A paper was presented to the last Safeguarding Board & the Safer Communities Partnership Board setting out relevant roles and responsibilities of Domestic Violence & Violence Against Women & Girls, as it relates to each of the respective boards.

3.2.2 Commissioning Priority Indicators (CPs): Escalated CPs only

CP NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
1111	DV sanction detection rates	Dec 14	53%	55%	N/A	51%	7.3%	Worsening	London average over same period 47%

CP NO	Comments and Proposed Intervention
1111 DV sanction detection rates	<p>There has been a slight reduction in the DV Sanction Detection rate in the most recent 12 months compared to a year ago. However overall performance in this area remains positive as:</p> <ul style="list-style-type: none"> • Barnet's rate in the last 12 months is greater than the London average • It is believed the rigorous implementation by Barnet Police of the 'Total Evidence Programme' (which aims to ensure that the police capture the best possible evidence at the scenes of DV crimes) is contributing to Barnet's performance in this area. <p><i>Level 1 intervention</i></p>

3.3.1 How is the Delivery Unit achieving against its Key Performance Indicators (KPIs): Escalated KPIs only

KPI NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target Achievement <i>level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
TC015	Reduction in violence against the person crimes – 2010/11 Baseline of 12.935 per 1,000 population	Dec 13 – Nov 14	11.96	8.92	N/A	12.90	44.6%	Worsening	London average for same time (Dec 13 – Nov 14): 18.12 Most Similar Group (MSG) average: 15.42

3.3.2 Interventions & Escalations

KPI NO and title	Comments and Proposed Intervention
TC015 Reduction in violence against the person crimes – 2010/11 Baseline of 12.935 per 1,000 population	<ul style="list-style-type: none"> • There has been a London wide increase in the levels of reported Violence with Injury over the last 12 months. The increases seen in Barnet have occurred at the same time as London and Barnet's Most Similar Family of Boroughs have seen increases in Violence against the Person. • It is believed the increase in reported offences is linked to changes in reporting and recording practices. • Barnet remains one of the boroughs with the lowest rate of Violence against the person. • Indeed in the period covered by the current outturn Barnet had the 5th lowest rate of Violence against the person out of the 15 areas in its Most Similar Group. • Barnet had the 6th lowest rate of Violence Against the Person out of all 32 London Boroughs. <p><i>Level 1 intervention</i></p>

4. RESOURCES AND VALUE FOR MONEY

4.1 Revenue

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Budget V1	Q3 Forecast	Variation		
	£000	£000	£000	£000		
Births Deaths & Marriages	(161)	(161)	(111)	50	The overspend is in relation to a reduction in income as a result of a decrease in the number of citizenship ceremonies taking place in Barnet, due to a Home Office decision to move resources away from administration of citizenship ceremonies and onto processing of passport applications.	31.1%
Community Well-Being Trans & Res Team	458	211	199	(12)		-5.6%
Community Safety	1,265	1,965	1,926	(39)		-2.0%
Prevention & Well Being	7,086	6,486	5,492	(995)	Underspend in relation to early achievement of savings on Housing related support contracts, over and above MTFS target for 14/15 (being used to partially offset MTFS savings pressures within Social Care); and additional Public Health funding secured in relation to the provision of Leisure Services.	-15.3%
Social Care Commissioning	1,629	934	845	(88)		-9.5%
Social Care Management (Adults)	1,396	396	363	(33)		-8.3%
Care Quality	1,188	1,349	1,350	0	There is an overspend in this area due to an increase in activity in the Deprivation of Liberty Safeguards (DOLS) service as a result of recent Supreme Court judgements. There is a risk that the year to date activity may continue throughout the year. The demand for this service is unpredictable and the LA has a legal duty to support clients who come forward for support. The forecast assumes that £500k additional funding will be available to meet this pressure; this funding is to be agreed	0.0%

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Budget V1	Q3 Forecast	Variation		
	£000	£000	£000	£000		
Integrated care - Learning Disabilities & Mental Health	39,099	40,887	41,825	939	at Delivery Board. There is additional pressure resulting from 7 new Ordinary Residence clients and an increase in service users with Learning Disabilities compared to last year; this is mainly in relation to transitions clients where, over the last 4 years, there has been pressure on the service due to clients transitioning over from Children's to Adults. This is made up of 2 elements – (1) New clients coming through and (2) an increase in cost for existing clients where there is no change in client needs. The year to date pressure for 14/15 of £1.1m has largely been absorbed within the Adults budget. However, there is likely to be additional pressure for an additional 8/9 clients in the last quarter of 14/15 and, for 15/16, an additional 34 clients expected. A&C do not receive any additional demographic growth for the pressure caused by the increase in Transitions clients.	2.3%

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Budget V1	Q3 Forecast	Variation		
	£000	£000	£000	£000		
Care Services - Older Adults - Physical Disabilities	37,525	38,562	39,604	1,042	The overspend is due to clients who were self-funders whose funds have depleted and are now the responsibility of the LA - 17 in total; the number of self-funders who come forward is difficult to predict but the LA has a legal duty to support clients unmet eligible needs . EMI Nursing and Residential are both areas of pressure within this line where client numbers have increased from 114 in month 2 of 13/14 to 134 at the end of month 9 14/15, reflecting Barnet's increasing older population. The £800k demographic growth received by A&C is not sufficient to meet these adenoidal demand on services. The forecast also assumes £500k MTFS savings in relation to Capita procurement savings on the Equipment contract will not be achieved.	2.7%
Dir. Adult Soc Serv & Health	185	185	178	(7)		-3.7%
Total	89,669	90,814	91,671	857		0.9%

4.2 Capital

	2014/15 Latest Approved Budget	Additions/ (Deletions) - Quarter 3	(Slippage) / Accelerated Spend - Quarter 3	2014/15 Budget (including Quarter 3)	Forecast to year-end	Variance from Approved Budget	% slippage of 2014/15 Approved Budget
	£000	£000	£000	£000	£000	£000	%
Adults and Communities	2,574	-	(4)	2,570	2,570	(4)	-0.1%
Adults and Communities	2,574	-	(4)	2,570	2,570	(4)	-0.1%

5. OVERVIEW OF DELIVERY UNIT

5.1 Managing the business

Headline	Commentary
Financial escalation	There are significant pressures on the Delivery Unit budget - see revenue section above.
Staff Performance	Adults and Communities staff conference has been scheduled towards the end of January 2015. Last year's event produced good ideas in terms of communicating prevention services. The focus of the staff conference is looking at people's values and delivering high quality services we would want our family & friends to receive.
FOI's	<p>We continue to achieve 100% compliance within Quarter 3 for all Freedom of Information requests received into the Adults and Communities Delivery Unit and responded to within 20 working days. Adults and Communities have received 25 Freedom of Information requests within Quarter 2 with a total of 70 for 2014/15.</p> <p>There has been an increase in the number of Subject Access Requests being made. Over April 14 – Dec 14, we received 15 Subject Access Requests compared to 1 over the same period in 2013/14. This has an implication on our resources.</p>
Compliments and complaints	<p>We received fewer complaints in quarter 3 (7 complaints) compared to the 21 received over the same period last year and to the 22 received in the previous quarter. Given the small number of complaints received in this quarter, there are no themes or trends to report.</p> <p>We have received 16 compliments in quarter 3. There were 22 compliments in the previous quarter.</p>

5.2 Change projects

Project	Outturn	Direction of Travel	Commentary
Older People Integrated Care Project (OPIC) (Health & Social Care Integration Spearhead Project 2)	Green	Same	Barnet Integrated Locality Team (BILT) has been fully operational since November 2014 working jointly with health care professionals. The pilot in the west locality is working with seven GP practices.
Shared Care Record	Amber	Same	Project deliverables has been expanded to include the 111 service, Ambulance, Out of Hours and Barnet MASH (Multi Agency Safeguarding Hub). The detailed mapping of processes and data flows has commenced.
Implementation of community safety enhancements and CCTV procurement	Green	Same	CCTV procurement is complete. 16 cameras have been upgraded to wireless; a new police viewing platform installed and the Enfield control room is receiving the CCTV feeds. Enhancement projects include the Restorative Justice Panel which is currently under review as a result of lack of referrals. The Integrated Offender Management project is progressing well with an increase to the cohort.

5.3. Risk Overview

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:

SCORE		IMPACT				
		1	2	3	4	5
		Negligible	Minor	Moderate	Major	Catastrophic
PROBABILITY	5 Almost Certain	0	1	1	2	0
	4 Likely	0	0	2	1	0
	3 Possible	0	3	12	5	0
	2 Unlikely	1	2	1	5	1
	1 Rare	0	0	0	0	0

Risk Commentary for Delivery Unit:

The Delivery Unit risks focus on the impact to Adults and Communities and include Financial, Reputational Impact and Impacts to Staffing and Culture which in turn all impacts upon our ability to provide the highest level of care and support. The Care Act and legal implications has made Risk Management activity key, so that Adults and Communities can react in a pragmatic way to any changes in the Councils landscape.

The mitigation of these risks are managed within the Adults and Communities Delivery Unit Transformation Programme to provide new ways of working and delivering services to bridge the gap between service demand and resources.

The risks identified for the Community Safety, Leisure and Registrars services are managed and regularly reviewed.

The following risk register lists those risks rated as 12 and above:

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0007 - Financial Financial management – the risk of inappropriate control of finances leading to overspends and erosion of the Council's minimum reserve position.	Major 4	Possible 3	Medium High 12	SMT monitoring Budget challenge (divisional monthly budget meetings, regular budget holder meetings and AD oversight and scrutiny) All savings targets have a saving owner, progress reported through Leadership team Regular meeting of Financial Sustainability Project Board SAP/Integra controls and	Treat	Quarterly	Moderate 3	Unlikely 2	Medium Low 6

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
				complementary staff training					
AS0074 - Financial MTFS Targets/Budget Pressures - LBB is required to pay Greenwich Leisure Ltd a contract management fee for the operation of the leisure facilities. The management fee is subject to annual inflation but the budgets are not.	Major 4	Likely 4	High 16	Budgets are monitored and controlled closely to reduce pressures where possible. Inflation bids are submitted to Finance annually to combat pressures	Tolerate	Quarterly	Moderate 3	Unlikely 2	Medium Low 6
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. Statutory Officers Group (Governance responsibilities)	Transfer	Quarterly	Moderate 3	Unlikely 2	Medium Low 6
AS0081 - Financial Financial Management-the risk of inappropriate control of finances leading to overspends and erosion of the Council's minimum reserve position	Major 4	Possible 3	Medium High 12	AS0081 SMT monitoring Budget challenge (divisional monthly budget meetings, regular budget holder meetings and AD oversight and scrutiny) All savings targets have a saving owner, progress reported through Leadership team. Regular meeting of Financial Sustainability Project Board . SAP controls and complementary staff training.	Treat	Quarterly	Moderate 3	Unlikely 2	Medium Low 6

Risk	Current Assessment			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment		
	Impact	Probability	Rating				Impact	Probability	Rating
AS0087 - Financial The Care Act Universal Deferred Payment (UDP) Scheme could have significant impact on the Council's cash flow with increased expenditure and reduced income collection from 2015/16 until 2018/19. While under the Act the care costs can be re-couped the risk remains that this will not be possible (i.e. dependants remain within the property).	Major 4	Almost Certain	High 20	The Care Act is part of A&C DU Transformation Programme. Corporate Insight Reports and financial modelling has taken place to predict demand; these reports will be reviewed on a regular basis. The UDP Policy is being revised and will be placed before the Adults and Safeguarding Committee in Dec. 2014.	Treat	Quarterly	Negligible 1	Almost Certain 5	Medium Low 5
AS0088 - Financial The Care Act increases the number of clients and carers who are entitled to either be assessed and / or receive a care package. This may increase the demand pressure on budgets; both to administer and provide care.	Major 4	Almost Certain 5	High 20	The Care Act is part of the A&C DU Transformation Programme. Corporate Insight reports and financial modelling have identified demand and financial pressures relating to care, but further reports will include the potential administration cost pressure. The modelling will be revised on a regular basis. Working with CSG to improve the A&C Front door to ensure the first response is to divert and ensure universal services are offered. The Programme is focusing on Information and Advice Services, Prevention Services, increasing the Community Offer and working with the IS investment to provide self - assessment capability.	Treat	Quarterly	Moderate 3	Almost Certain 5	High 15

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
AS0089 - Business Continuity 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. It could increase the administration and use of A&C DU staff resources; plus increase the cost of care.	Moderate 3	Likely 4	Medium High 12	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. Potential number of clients impacted and costs to be modelled.	Treat	Quarterly	Moderate 3	Likely 4	Medium High 12
AS0090 - Financial 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.	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) assessments required to be undertaken by LA's.	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.	Treat	Quarterly	Minor 2	Almost Certain 5	Medium High 10
AS0092 - Financial The Better Care Fund requires a joint bid by Health and Adult Social Care to apply for financial funding to move the services towards	Major 4	Possible 3	Medium High 12	Development of revised plan for re-submission in December 2014.	Treat	Quarterly	Major 4	Rare 1	Medium Low 4

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Board Assurance (timing)	Target Assessment Impact Probability Rating		
<p>integration, with an expected outcome of the services becoming more effective and efficient. If the bid is not approved then the Council and health partners do not receive the full funding, which they require to change the services. The Better Care Fund plan has been approved with conditions.</p>									
<p>AS0094 - Staffing & Culture Quality of service provision cannot be guaranteed, the service is staffed by over 20% agency staff and they may leave with little notice.</p>	Major 4	Possible 3	Medium High 12	<p>Work with HR to implement wide ranging recruitment campaign. Supervision and quality monitoring of agency workers.</p>	Treat	Quarterly	Minor 2	Unlikely 2	Medium Low 4

5.4. Equalities

Equalities description	Comments and Proposed Intervention
Equality Action Plan	<p>The Equalities Action Plan is currently subject to revision to reflect the objectives of the Council's strategy. The revised plan will ensure that the equalities indicators and data on protected characteristics are regularly reviewed and that actions to reduce any identified inequality issues are addressed. The revised plans will also include the full range of actions necessary to comply with our statutory duties under the Equalities Act 2010 and the commitments of the Council's Strategic Equalities Objective.</p> <p>Equality Impact Assessments for the Medium Term Financial Strategy have been delivered.</p>

5.5. Customer Experience

Comments and Proposed Intervention
<p>The Front Door project will lead to significant improvements in the customer experience coming into social care from April 2015.</p> <p>The Autumn 2014 survey of residents showed 28% of residents rate Social Services for Adults as good or excellent. This is a 4%pts reduction since the Spring 2014 survey result but remains 9%pts above the London Benchmark.</p>

Appendix
KPIs

CP NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
CP012	Community based packages have support plans that are fully person-centred and reviews indicate that outcomes are achieved	Apr 14 - Dec 14	93%	90%	$\frac{1,866}{1,985}$	94%	4.5%	Improving	
RN024	Nationality ceremony to be offered within 90 days of receipt of letter from Home Office	Apr 14 - Dec 14	100%	100%	$\frac{1,057}{1,057}$	100%	0%	Same	
VA025	Achieve Outer London Average for homecare spend per week for people with learning disabilities aged under 65	Nov - 14	£319	£600	N/A	£264	56%	Improving	LD Homecare = Our PSS-EX1 had been re-submitted by Finance showing a substantial decrease in cost from our original submission at the beginning of the year previously at £834 per week for 2013/14. For the VA025-27 this is an annual submission which we are unable to report quarterly like-for-like, however we are able to

									show the average direct costs which are as follows: Q1 LD Home Care: £264 Q1 LD Day Care: £399 Q1 PD Day Care: £241
VA026	Achieve Outer London Average for day care costs per week for people with learning disabilities aged under 65	Nov - 14	£397	£575	N/A	£399	30.6%	Worsening	
VA027	Achieve Outer London Average for day care costs per week for people with physical disabilities aged under 65	Nov - 14	£233	£250	N/A	£241	3.6%	Worsening	
AC004	Reduction in percentage of people reporting the extent to which they are very/fairly worried about ASB in their area	Oct 13 - Sept 14	25%	26%	N/A	22%	15.4%	Improving	
AC005	Improve customer satisfaction levels (leisure facilities)	Apr-14 - Nov 14	95.1%	95.0%	<u>299</u> 311	96.1%	1.2%	Improving	

Commissioning Priorities

KPI NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target <i>Achievement level expected</i>	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
1105	Numbers and average cost of new personal budgets at 13 weeks (91 days) by care group.	Nov - 14	2566 service users £190.42 average cost	N/A	N/A	2533 service users £197.12 average cost	N/A	N/A	Non-comparable local indicator
1106	Exit enablement without any home care services	Apr 14 - Dec 14	67.39%	52%	$\frac{657}{956}$	68.7%	32.2%	Improving	Non-comparable local indicator
1107	Number of new older people placed into registered care (analysed by reason and including identification of who has dementia.to be recorded at panel	Apr-14 - Nov 14	42	N/A	N/A	90	N/A	Worsening	Non-comparable local indicator

KPI NO	Indicator Description <i>Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan</i>	Period Covered <i>Timeframe data has been measured</i>	Previous Results <i>Previous result from the most relevant period</i>	Target Achievement level expected	Numerator and Denominator <i>Relevant number that achieved the level required by the indicator out of total for indicator</i>	Result <i>Most recent result of the indicator measurement</i>	Target Variance <i>A calculation of how far the outturn is from the target</i>	DoT <i>An assessment of whether performance has improved since the previous results</i>	Benchmarking <i>How performance compared to other councils</i>
1110	Reduction in per cent of repeat incidents of DV	Apr 14 - Sept 14	7%	8.9%	N/A	5.5%	0.9%	Improving	Non-comparable local indicator