#### CABINET MEMBER FOR ADULT SOCIAL CARE

Venue: Town Hall, Date: Monday, 16th April, 2012

Moorgate Street, Rotherham.

Time: 10.00 a.m.

## AGENDA

1. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972

- 2. To determine any item which the Chairman is of the opinion should be considered later in the agenda as a matter of urgency
- 3. Minutes of previous meeting (Pages 1 3)
- 4. Connect to Support (eMarketplace Service Solution) (Pages 4 8)
- 5. Proposed Relocation of Green Lane Visual Impairment Service (Pages 9 10)
- 6. New Community and Home Care Service Framework (Pages 11 13)
- 7. Extra Care Housing and Grafton House Merger (Pages 14 15)
- 8. Exclusion of the Press and Public Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (as amended March 2006) (information relating to the financial or business affairs of any person (including the Council)).
- 9. Supporting People Programme Award of Accommodation Based Contracts for Housing Related Support and Housing Management (Pages 16 22)

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## CABINET MEMBER FOR ADULT SOCIAL CARE Monday, 26th March, 2012

Present:- Councillor Doyle (in the Chair); Councillors Walker.

Apologies for absence:- Apologies were received from Gosling, Jack, P. A. Russell and Steele.

## H56. MINUTES OF PREVIOUS MEETING

Consideration was given to the minutes of the previous meetings held on 12<sup>th</sup> March, 2012.

Resolved:- That the minutes of the previous meetings held on 12<sup>th</sup> March, 2012, be approved as a correct record.

#### H57. ADULT SERVICES REVENUE BUDGET MONITORING 2011-12

Consideration was given to a report, presented by the Finance Manager (Adult Services), which provided a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March, 2012 based on actual income and expenditure to the end of February, 2012.

It was reported that the forecast for the financial year 2011/12 was an underspend of £2.145M against an approved net revenue budget of £76.400M.

It was explained that there were a number of underlying budget pressures which were at present being offset by a number of forecast underspends:-

The underlying budget pressures included:

- an overall forecast overspend within Older Peoples' Home Care Service mainly due to increased demand for maintenance care within the independent sector
- pressure on independent home care within Physical and Sensory Disability Services due to continued increase in demand
- shortfall in respect of income from charges within in-house residential care
- additional employee costs due to high dependency levels and cover for vacancies and long term sickness within older people inhouse residential care
- an overall forecast overspend on Direct Payments across all client groups due to increase in demand was being reduced by savings on independent and voluntary sector contracts as clients in those schemes moved to Direct Payments
- recurrent budget pressure on Learning Disabilities Day Care transport including income from charges

These pressures had been offset by the following forecast underspends:-

## CABINET MEMBER FOR ADULT SOCIAL CARE - 26/03/12

- Forecast net underspend on Older People independent sector residential and nursing care due to an increase in the average client contribution and additional income from property charges
- Slippage on developing Supported Living Schemes within Physical and Sensory Disabilities
- Review of care packages within Learning Disabilities Supported Living resulting in efficiency savings with external providers and additional funding from health
- One off slippage on vacant posts as part of restructure/reviews including voluntary early retirements
- Underspend on Rothercare Direct due to slippage on vacant posts and a reduction in expenditure on equipment including leasing costs
- Slippage on recruitment to vacant posts within Older People's Assessment and Care Management Teams
- Slippage on developing support services for carers
- Underspend on preserved rights clients within learning disabilities residential care and nursing care
- Difficulties in recruiting to vacant posts within Adult Safeguarding Team
- Further efficiency savings on Supporting People contracts in order to meet 2012/13 budget savings target
- Impact of additional funding from NHSR for Support to Carers Strategy
- Further slippage on developing assistive technology
- Savings within Supported Living Schemes across client groups due to vacant posts and additional income from health
- Further slippage on developing specialist residential and respite care for clients with a physical or sensory disability
- The additional one-off income from Health in respect of additional funding announced by the Government for investment in Social Care Services which benefitted the Health system, recognising the significant pressures during the winter period, had now been agreed with NHSR.

Total expenditure on Agency staff for Adult Services so far was £208,021 compared with an actual cost of £355,049 for the same period last year. The main costs were in respect of residential care and assessment and care management staff to cover vacancies and sickness. There had been no expenditure on consultancy to date.

Careful scrutiny of expenditure and income together with close budget monitoring remained essential to ensure equity of service provision for adults across the Borough within existing budgets. Any future reductions in continuing health care funding would have a significant impact on residential and domiciliary care budgets across Adult Social Care.

Resolved:- (1) That the latest financial projection against budget for 2011/12 be noted.

### H58. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local

## CABINET MEMBER FOR ADULT SOCIAL CARE - 26/03/12

Government Act 1972 (as amended March 2006) (information relating to the financial or business affairs of any person (including the Council)).

## H59. MENTAL HEALTH DAY SERVICE

The Director of Health and Wellbeing submitted a proposal to relocate the Council's Mental Health Day Service from Clifton Court to a suitable alternative Council building in order to ensure that the Service best met the needs of its customers.

Community Mental Health Services must be sustainable and personalised and reflect recovery and social inclusion principles. This would mean movement away from premises-based day Services in favour of individual support to access local mainstream services.

Resolved:- That the proposed relocation of the 'New Service Provision' (previously Clifton Court) Day Services be approved.

## ROTHERHAM BOROUGH COUNCIL - REPORT TO CABINET MEMBER

1.	Meeting:	CABINET MEMBER DELEGATED POWERS ADULT SOCIAL CARE
2.	Date:	16 <sup>TH</sup> APRIL 2012
3.	Title:	Connect to Support (eMarketplace service solution)
4.	Programme Area:	Resources Directorate; Commissioning, Policy and Performance

## 5. Summary

It has been previously agreed that Rotherham would adopt the regional approach for an eMarketplace. Rotherham is a national leader in this innovative initiative. This project has now reached implementation stage and is known as *Connect to Support (CtS)* Rotherham. The timeline is demanding with 'sign off' of the key actions and strategy by 18<sup>th</sup> May 2012.

This paper sets out the progress to date and provides an insight into the next steps as Rotherham embarks on its journey to implement the system.

#### 6. Recommendations

#### **That Cabinet Member:**

- 6.1 Notes that Connect to Support fits with Personalising services Transforming traditional services to provide better outcomes and better use of resources.
- 6.2 Considers the key issues identified within the body of the report
- 6.3 Notes the progress achieved and the timeline for implementation of Connect to Support in Rotherham

## 7. Proposals and Details

## 7.1 Background

The eMarketplace originated with the REIP. Funding was provided to procure a regional solution this involved 16 authorities in Yorkshire and Humber. Nationally there are several other authorities joining in with the approach.

E-Marketplace is now known across all authorities as *Connect to Support* (CtS). There have been significant advances in Doncaster, North Lincolnshire and Kirklees and Doncaster's site is available to access. Rotherham, being one of the mid-implementers is leaders in the development of CtS; it is important that Rotherham continue as national leaders in this innovative initiative.

Doncaster's site is: https://www.connecttosupport.org/c2s/ui/content/MvCouncil/Common.aspx.

The tendering process was won by Shop4Support (s4s). The system already exists; there is no 'build' of the solution, there are no I.T. set up issues and the Council will not be charged to implement the site in their authority. s4s will support each LA's CtS web site to be as attractive to customers (users and providers) as possible, as soon as possible.

### 7.2 Progress to date

A project management approach has been established to take forward the development of the eM in Rotherham which has representation from colleagues across a range of services across the authority.

#### 7.2.i Implementation

The project is now at implementation stage in Rotherham. There are several separate elements to implementation: 'sign off', establishing the basic system, and 'going live' including the date for 'soft launch' and the date for public launch. There are some significant challenges the council will face in taking this project forward which will need addressing during implementation:

- 1. Getting the information and advice content we want citizens to see uploaded onto our Beta site
- 2. Agreeing accreditation criteria and processes for provider registration
- **3.** Identifying and communicating effectively with providers and stakeholders
- **4.** Making sure council policies create choice and control for customers so that an actual external market is created

In preparations for 'sign off' a strategy will be developed which will contain details of process change including changes to existing ways of working, impact on each stakeholder including obtaining stakeholder buy-in, technology including basic system functionality, implications such as accreditation and performance management. The strategy is to be signed off on 18<sup>th</sup> May. The basic system functions will then be tested with input from staff, providers and customers alongside S4S. Work is ongoing and to deliver the strategy and achieve soft launch there are several key areas to deliver against:

- Agreeing accreditation criteria and processes for provider registration. It is critical that service users continue to receive services that are safe and that they are not put at risk. Safeguarding throughout the site is paramount. Agreement is required on a local accreditation process or implementation of the regional accreditation model. Doncaster has appointed an officer to accredit every provider onto the system, excepting those providers who have undergone an accreditation process as part of commissioning. Lincolnshire has essentially gone with the Caveat Emptor approach. Should Rotherham go with the Doncaster model this will require resourcing.
- Agreeing level of buy in of CtS 'template' beta site for content. The appearance and content of the site is boiler plated by S4S through application of templates. However it is imperative that Social Workers and Managers agree the look, feel and content is right for Rotherham. There is the opportunity for a bespoke approach and support from s4s to achieve this but this will incur cost
- Agreeing content including advice & information. Getting the information, signposting and advice content we want our citizens to access and agreeing how we will structure information and advice on the site; including identifying content owners across RMBC to upload information.
- Launching the site and engaging Social Workers to maximise benefits. Establishing the communication and engagement strategy and raising awareness and promoting the benefits of CtS to social workers through 2 events led by the Strategic Director.
- Engaging and signing up of providers to the site. Building on the provisional work with providers to sign up to the site including the VCS and the for profit sector where appropriate. There is a need for minimum of 20 providers to be on the site for the soft launch. A programme of marketing and events needs to be finalised

Work packages at the moment are focused on developing the beta site, finalising plans on accreditation, information and advice and registering providers on the site. A Communications and Engagement plan is in development to ensure stakeholders are kept informed of the developments of the site and so that staff, providers and customer receive appropriate awareness training. Customer forums will also be consulted with on the look, feel and content of the site.

## 7.2.ii Timescale

Rotherham is a 'Mid-implementer'. Each LA only has <u>a two month</u> window of concentrated support from s4s, to establish the site, have the soft launch and agree sign-off of the basic system. The two month window for intensive support from s4s has started. Failure to engage with s4s could impact on the regional schedule if Rotherham needs to be moved back in the

implementation timeline. Dates of the soft launch and the public launch will be agreed following completion of the Implementation phase.

#### 8. Risks

The risk of not implementing the eMarket place regional approach would be to fall behind other authorities nationally in the shift away from a traditional approach to enabling customers and self funders to purchase care from a retail care market.

The risk of not implementing this approach will mean that the time spent by social workers and care managers will continue to be used to support individuals to choose care in the traditional way whereas eMarketplace offers a model which can be supported through brokerage at a lower cost. This allows social workers to focus on the complex cases needing high levels of input.

#### 9. Finance

Financial information is contained within this report

## 10. Policy and Performance Agenda Implications

Putting People First – Transforming Social Care ADASS Personalisation Milestones

CQC Outcomes Framework Choice and Control:

- Councils are delivering efficiencies by actively reshaping services towards prevention and with partners supporting people to live independently; thereby reducing the number of people entering long-term support or requiring ongoing support from social care. VfM (PPF)
- The council is shaping the local market to ensure that services are in place to support independence, choice and control and that they are affordable in the long term
- Commissioners work with providers and partner agencies to ensure that the services commissioned meet needs. Higher quality care is delivered at increased efficiency and effectiveness. VfM ( PPF/safeguarding)
- Councils have evaluated how successful personal budgets and self directed support are at improving choice and control for individuals. Evidence shows people are able to use the various self directed support options and find that local services can meet their needs PPF (safeguarding/VfM)

## 11. Background Papers and Consultation

SLT Paper (11-07-11) Emarketplace Service Solution

DH (2010) Equality and Excellence – Liberating the NHS

Gradus Consulting Bid – Progressing and eMarketplace in Yorkshire and Humber

DH (2006) Our Health Our Care Our Say - A New Direction for Community Services

DH(2007) Commissioning Framework for Health and Wellbeing

HMG (2007) 'Putting People First':

DH (2008) Transforming Social Care LAC (DH) (2008 and 2009) 1

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DH (2008) Independent Living Strategy

DH (2009) Use of Resources in Adult Social Care

DCLG (2006) Creating Strong, Safe and Prosperous Communities

DH (2007) World Class Commissioning Vision and Competencies

DH (2008) Commissioning for Personalisation: A Framework for Local Authority Commissioners

In Control (2008) Smart Commissioning : exploring the impact of personalisation on commissioning

NAS (2008) Adult Services Commissioning Strategy 2008-23

NAS (2009) Rotherham Market Facilitation Plan and Action Plan 2010-13

NAS (2009) The Rotherham Personalisation Plan 2009-11

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## ROTHERHAM METROPOLITAN BOROUGH COUNCIL NEIGHBOURHOODS & ADULT SERVICES

# Briefing Note to Cabinet Member for Adult Social Care 16 April 2012

**Proposed Relocation of Green Lane Visual Impairment Service** 

Proposed Relocation of Green Lane Visual Impairment Rehab Service to Rotherham Intermediate Care Centre, Badsley Moor Lane, Rotherham

## **Background**

The Green Lane Visual Impairment Rehab Service has operated since 1991 from a building at the rear of Ackroyd House. The building is leased to the Local Authority and is limited in its design and compliance with DDA requirements. Based on these facts it is therefore difficult to effectively deliver a rehabilitation service to customers with a visual impairment.

## **Proposal**

The Rotherham Intermediate Care Centre has recently completed phase two of its refurbishment. Works completed include a new roof to the building and a redesign of the physical space within the building, which now provides opportunities for other services to be provided on site without affecting the existing service.

Given the overlap between these two services in that they are both rehab based it is proposed to relocate the Green Lane Visual Impairment Rehab Service to this worksite as soon as is possible.

Subject to agreement from Health Partners, it is proposed to relocate this service as soon as is practically possible. Confirmation of dates will be provided to the Cabinet Member upon confirmation from Health

## **Practical Considerations**

To facilitate this transfer agreement is currently being sought from Health Colleagues on this proposal. If agreement can be reached, the following actions will be required:

- Three months notice will need to be served to the current property owner to terminate the lease agreement at Ackroyd House.
- Negotiations with our Health colleague's facilities management team will need to commence to determine what if any rental would need to be paid. However, given that a rehab service will be delivered on site this could be proposed on a peppercorn basis i.e. nominal amount of £1 a year.

- A time specific action plan would need to be put in place to ensure that a smooth transition of the service to this worksite is achieved.
- A room booking system will need to be developed on site to ensure the effective use of rooms and facilitate multiple use
- Staff relocated to this worksite (two currently but with a budget for three) could be supervised by the existing Team Leader responsible for the existing rehab service.

## **Financial Considerations**

If agreed facilitating this transfer will provide efficiencies to the Local Authority. Full year savings would equate to approximately £34,000 in procurement costs as a result of any Co-Location of Services.

Any remedial dilapidation works to the Green Lane site as part of the tenancy agreements could potentially be met from Capital Monies. This will minimise the impact on the current revenue budget allocation and ensure any efficiency savings are maximised.

**Report Author:** Shona McFarlane

Director of Health and Wellbeing

**Date:** 16 April 2012

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## ROTHERHAM METROPOLITAN BOROUGH COUNCIL NEIGHBOURHOODS & ADULT SERVICES

# Briefing Note to Cabinet Member for Adult Social Care 16 April 2012

Update – New Community and Home Care Service (CHCS) Framework

#### Introduction:

The purpose of this report is to update members on the mechanisms put in place to monitor the outcomes, quality and regulatory compliance of service providers accepted onto the new Community and Home Care Service (CHCS) Framework.

The Outcome Monitoring Framework and Toolkit or 'Home Matters' scheme will support the contracts team to enforce the terms and conditions of the Framework Agreement. This will in turn drive up the quality of care delivery.

## **Background:**

- 1.1 'Home Matters' is a scheme introduced to monitor service delivery.

  The responsibility for applying the scheme rests with the contract monitoring team based in the Commissioning Policy and Performance Unit, Resources Directorate.
- 1.2 The scheme is based on the Care Quality Commission's 'Essential Standards of Quality and Safety' and guiding principles contained in the Community and Home Care Service's (CHCS) specification, which details contract monitoring arrangement in terms of outcomes, outputs and standards.
- 1.3 It will apply to 15 care providers secured on the CHCS framework agreement as a result of a recent Tender exercise; and will focus on outcomes achieved as a result of service intervention.
  - An outcome' is defined as the impact on the person concerned which is planned, positive and can be attributed to the service delivered. The degree at which outcomes are achieved will indicate the level of quality.
- 1.4 The Outcomes Monitoring Framework will support the enforcement of special measures to improve, default notices served and when necessary actions taken to terminate agreement with the service provider.

## 2. Methodology:

- 2.1 An Outcomes Monitoring Toolkit has been developed. Providers will populate this with information and provide evidence to support how they are achieving service outcomes and all supporting evidence will be verified.
- 2.2 Further evidence will be gathered by face to face customer interviews and postal surveys of staff and customers using the Adult Social Care Outcomes Toolkit (ASCOT)
- 2.3 The Electronic Home Care Monitoring system currently being procured will provide further intelligence and monitoring data.
- 2.4 In addition there will be analysis of and not restricted to:
  - Contract compliance
  - Submissions of qualitative and quantitative reports by the provider
  - Missed calls or late calls
  - Substantiated customer complaints
  - Substantiated Safeguarding Concerns
  - Substantiated Contracting Concerns
  - Refusals to take on care packages without reasonable explanation
  - Returned care packages without reasonable explanation
  - Information provided by Rotherham MBC Staff and Strategic Partners
- 2.5 Constant monitoring activity will take place throughout the year and in addition bi-monthly partnership meetings and annual reviews will be undertaken.

## 3. Rating system:

- 3.1 In addition the level of compliance with the Community and Home Care Service contract and service specification will also contribute to an overall judgement being made and lead to a quality rating award for each provider.
- 3.2 The provider will be assessed as performing at one of three levels. Level C being the minimum level and indicates a satisfactory performance. Level B indicates a good performance and Level A indicates an excellent performance.
- 3.3 A weighted scoring matrix will calculate the rating. Failure to reach level C will result in a default notice being served and special measures improvement plan being issued and could ultimately end in removal from the Framework. On reaching Level C the provider and the CQAO will agree an improvement plan. On reaching Level B the provider and CQAO will agree a plan for excellence.

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3.4 Providers may challenge the rating system but this is mitigated by the tender process, contract arrangements.

## 4. Reporting:

4.1 Results and findings will be reported through DLT and the Contracting for Care Forum; and shared with members, providers and customers through such media as the e-marketplace, 'Contracting for Care' quarterly Newsletter and the RMBC web site.

**Report Author:** Shona McFarlane

Director of Health and Wellbeing

**Date:** 16 April 2012

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## **Briefing Note**

Circulation List:-

Councillor Doyle - Cabinet Member Adult, Health and Wellbeing

## **Extra Care Housing and Grafton House Merger Update**

This briefing note outlines the current position of the Extra Care Housing and Grafton Merger.

A further report and Action Plan will be submitted to Cabinet Member for approval on the next phase of the merger. However this briefing note gives a summary of actions to date and next steps.

On the 27<sup>th</sup> September 2011 a report on the short term proposals for merging Extra Care Housing and Grafton House was submitted to Cabinet Member for Adult Health and Wellbeing

The report made recommendations on the merger of Extra Care Housing Support and Grafton House Service which are both under the remit of Health and Wellbeing - Adult Community Services.

The rationale behind merging the two services together was to create one joint service which improves service delivery, and provides services at a personalised level to the customer. In addition the joint service created management efficiencies which offset the savings target for Grafton House and satisfied Supporting People requirements.

The efficiencies at the management level have subsequently been achieved and the direct line management of Extra Care Housing and Grafton have been streamlined to a single line management structure.

Following the report in September 2011 there has been further analysis undertaken of the services to identify the most effective way of delivering the joint service to the customer. This analysis will be the secondary part of the review and will aim to look at the current operation of the support provided to the customer. The outcome of this will provide a consistent approach across all schemes, whilst offering services to the customer that demonstrate value for money.

The next phase of the review will look at the different levels of support that are currently in place at Grafton and Extra Care with a view to streamlining the teams and providing an holistic Housing Support Service that would aim to be delivered more flexibly across the whole service.

In addition to the current Community Support and Housing Support Service there is a dedicated home care team attached to Grafton House, Oak Trees, and Potteries Court. The Action Plan which outlines the next phase and timelines of the review also captures this, and the current service of the dedicated care teams on site will need to be reviewed in line with customers needs.

An overarching consultation plan and Equality Impact Assessment will also be devised to ensure that that the new merged service meets the needs of the customer and considers any areas of risk.

## Agenda Item 9

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By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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