#### CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING

Venue: Town Hall, Moorgate Date: Monday, 6th December, 2010

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. Apologies for Absence
- 4. Minutes of the previous meeting held on 8th November, 2010 (herewith) (Pages 1 4)
- 5. Adult Social Care 2nd Quarter (April to September) performance report for 2010/11 (herewith) (Pages 5 11)
- 6. Skills for Sustainable Growth: Government Proposals for the Future of Adult and Community Learning (herewith) (Pages 12 14)

## CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING 8th November, 2010

Present:- Councillor Doyle (in the Chair); Councillors Gosling and Steele.

Apologies for absence were received from Councillors P. A. Russell and Walker.

## H36. MINUTES OF THE PREVIOUS MEETING HELD ON 11TH OCTOBER 2010

Consideration was given to the minutes of the previous meeting held on 11<sup>th</sup> October, 2010.

Resolved:- That the minutes of the previous meeting held on 11<sup>th</sup> October, 2010 be approved as a correct record.

## H37. PDSI COMMISSIONING STRATEGY

Chrissy Wright, Director of Commissioning and Partnerships presented the submitted report in respect of the PDSI Commissioning Strategy.

She reported that the strategy provides a framework for the strategic commissioning for people with physical and/ or sensory disabilities in Rotherham for the next 3 years from 2010-2013.

The overall strategic direction was to move towards self directed support and helping people to help themselves. This approach would achieve efficiencies through decommissioning and recommissioning services including shifting from traditional service provision.

The strategy provides a framework for the actions needed to achieve change and the action plan outlines the 3 year strategic commissioning intentions. There would be an annual implementation plan with detailed costings to support decision making on the decommissioning and recommissioning of services.

The report set out the details of the strategic intentions for the PDSI service and included comments made by people with physical and/ or sensory disabilities about what they wanted and how their needs and aspirations could be met.

Formal consultation had taken place with customers and their carers utilising the nationally recognised CSED 'Anticipating Future Needs Toolkit and included face to face interviews. A process analysis followed this process and provided valuable insight into the lives,

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aspirations and expectations of individuals.

Building on this approach the Service Quality team have utilised the customer experiences of mystery shopping, reality checking and auditing access to services/information to learn from customer experiences and improve services and outcomes.

The work of customer inspectors was ongoing and the outcomes of their audits were critical and central to the development of services and improvement of existing service provision. Learning from complaints, surveys and the Fairs Fayre events had also been incorporated into the strategy.

The strategy had been widely shared within NAS, and all comments and amendments had been included and the strategic approach had the support of senior officers.

It was noted that, an action plan had been produced in order to achieve the change required, and this was attached to the strategy as Appendix 1.

Reference was made to strategic intentions for the PDSI service based on what people had told us they wanted. It was felt that more emphasis should be placed on what a person needed rather than what they wanted. It was confirmed that, this would be established as part of the assessment of need, and at that point it would be agreed what method could be used to best achieve it.

The Cabinet Member questioned how work with the BME community would integrate into the strategy. It was confirmed that work was ongoing with the BME community through the Joint Improvement Partnership and that this would feed into the strategy. The strategy was a living document which would continually change and reshape services provided.

Reference was made to the provision of day care and concerns were raised at the reduction in the number of people attending day care centres. The Director of Health and Wellbeing commented that more people were opting for being supported to undertake activities on their own rather than attending day care centres.

Resolved:- That the Cabinet Member for Adult Independence Health and Wellbeing approve the draft strategy and agree that performance against the action plan be reported by exception via the

DLT performance reporting framework.

#### H38. SHARED LIVES ADULT PLACEMENT SCHEME

Chrissy Wright, Director of Commissioning and Partnerships presented the submitted report in respect of the Adult Placement Shared Lives Scheme.

It was proposed that the current Adult Placement Shared Lives Scheme be extended to all eligible adults. The extension of the existing scheme would support vulnerable adults to develop or maintain their independence in a stable environment, support those leaving residential care and full time education, prevent inappropriate admissions to long term care and provide preparation for independent living.

Adult Placement Schemes offer customers choice and control and personalised support and are regulated by the Care Quality Commission. They are required to have a registered manager and an Approval Panel for prospective carers which consists of approximately 5 people appointed by the scheme but operating independently.

The current Shared Lives scheme in Rotherham operates from the learning disabilities services and offers a variety of flexible and personalised services for individuals. It currently supports approximately 25 people with a learning disability on a long term, respite/ short stay and day care basis.

The National Association of Adult Placement Schemes (NAAPS) was commissioned to provide a report on the quality, outcomes and cost effectiveness of Shared Lives Schemes and identified the following improved positive outcomes:

- Living the life the person wants
- Developing the person's confidence/ skills/ independence
- Ongoing relationship between person and carer
- Having choices and being in control
- Having different experiences
- Wider social networks
- Increase in self esteem
- Being part of the carer's family and networks
- Integration in the community
- Physical and emotional wellbeing

The report also highlighted the 'cost effectiveness being greater in larger schemes'. This evidence supports the extension of the local

#### ADULT INDEPENDENCE, HEALTH AND WELLBEING - 08/11/10

scheme to achieve better outcomes for local people and to achieve cost efficiencies.

The current levels of payment for services provided are structured and these were outlined in the report.

Contributions from service users were subject to a financial assessment with a maximum charge of £200 per week being levied.

There is currently a named registered manager and a full time coordinator managing the LD Scheme and supporting the Approval Panel within the learning disabilities service. In order to develop the scheme an additional full time worker would be required, and it was proposed that a level 3 social worker be recruited as Shared Lives Officer. This would ensure the current high level of knowledge and skills required to recruit and retain carers, and continue to deal with safeguarding issues effectively. The current membership of the Approval Panel would also need to be reviewed in order to reflect the extension of the scheme to all eligible adults.

The average cost of a residential placement for people with a physical and/ or sensory disability is £546.96 per week which compares to an average cost of £300 per week for the shared lives scheme. This equates to an annual saving of approximately £13,000 per year for each residential placement. In addition there would also be cost savings compared to current costs of respite care which average at £546.96 per week. The average cost of day care was £80 per day including transport compared to a cost of £27.85 per day for 5 hours of day care/ sitting/ befriending service provided by the shared lives scheme.

The funding for the pump priming of this initiative would be provided by the Supporting People Grant for 2010/11 and a review would take place at the end of six months to identify the learning and cost benefit analysis, with a view to establishing the viability of the continuance of this initiative.

Resolved:- (1) That the Cabinet Member for Adult Independence Health and Wellbeing approve the extension of the scheme to enable the provision of placements to all eligible adults.

(2) That a further report be presented in 9 months time updating the Cabinet Member on progress made.

## **ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS**

1.	Meeting:	Cabinet Member for Adult Independence, Health and Well Being
2.	Date:	6 <sup>th</sup> December 2010
3.	Title:	Adult Social Care 2 <sup>nd</sup> Quarter (April to September) performance report for 2010/11
		All Wards Affected
4.	Programme Area:	Neighbourhoods and Adult Services

## 5. Summary

This report outlines the 2010/11 Quarter 2 Key Performance Indicator (KPI) results for the Adult Social Care elements of the Directorate. Seventeen (17) KPIs are included in the suite. Of these, at the end of Quarter 2, 59% (10) are on target and action plans are in place to exceed last year's performance.

#### 6. Recommendations

That Cabinet Member is asked to note the results and the actions in place to improve performance.

#### 7. Proposals and Details

We have been notified by CQC that we have maintained our 'excellent' rating within Adult Social Care for the 09/10 performance period.

Quarter 2 results can be seen in Appendix 'A' where a star indicates 'on target' and a triangle indicates 'off target'.

The following 10 performance measures have achieved their Quarter 2 targets;

- NAS 5 Average waiting time for an OT assessment
- NAS 35 Percentage of homes graded silver or above through Home From Home
- NI 141 Percentage of vulnerable people achieving independent living
- NI 142 Percentage of vulnerable people who are supported to maintain independent living
- NI 146 (Vital Signs 07) Adults with learning disabilities in employment
- NAS 36 Number of safeguarding referrals
- NAS 46 Percentage of safeguarding cases substantiated at case conference
- NI 125 (Vital Signs 04) Achieving independence for older people through rehabilitation / intermediate care
- NI 145 (Vital Signs 05) Adults with learning disabilities in settled accommodation
- NAS 41 Percentage of new staff undertaking safeguarding e-learning course within 12 weeks of commencing employment

The following 7 performance measures did not achieve their Quarter 2 targets;

• NI136 (Vital Signs C3) People supported to live independently through social services (LAA)

Performance at the end of Quarter 2 (2334.36) is below the monthly control target of 2801.50 and is rated 'Off target' for achieving the year end figure of 3286.

At the end of Quarter 2 we were helping 5,600 service users to live at home.

Plans to improve performance include the following actions:-

- Age Concern has been commissioned to provide a support service for people who contact us but following assessment do not meet FACS.
   1,400 potential customers have been identified and this scheme will be included in data gathered for this year's Grant Funded Services survey. This will significantly improve performance.
- Work is currently ongoing with Neighbourhood Partnerships to capture service users who have attended community funded services.
- Additional performance to be gained by capturing service users in receipt of equipment with ongoing maintenance costs. Work is taking place to capture and record these service users in Swift.

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This additional activity will only be counted in the outturn once confirmed by voluntary sector providers in the annual survey that is due to take place week commencing 22<sup>nd</sup> November.

## NAS 1 (PAF D40) Percentage of service users receiving a review

Performance at the end of Quarter 2 (40.44%) is below the control target of 45.62% and is rated 'Off target' for achieving the year end figure of 87%. Performance so far this year has 'Improved' compared to the same period last year (35.59%).

A performance clinic was held in early August 2010 and an action plan was put in place to improve the performance over the remaining months. This resulted in an improving performance on telephone reviews and Learning Disability reviews.

## NAS 18 Percentage of service users receiving a statement of their needs and how they are being met

Performance at the end of Quarter 2 (96.08%) is below the monthly control target of 97.29% and is rated 'Off target' for achieving the year end figure of 98%. Performance so far this year has 'Improved' compared to the same period last year (86.87%).

Currently the indicator is short of its target by 124 service users for whom a statement of need has not been sent out following an earlier assessment or review.

## NI130 (Vital Signs C12) Percentage of service users receiving self directed support

Performance at the end of Quarter 2 (22.51%) is below the monthly control target of 25% and is rated 'Off target' for achieving the year end figure of 50%.

Currently, all new service users within Older People, Physical Disabilities, Sensory Disabilities, and Learning Disabilities teams are offered a Personal Budget as the default position and we are undertaking reviews on existing service users to move them over to a Personal Budget.

Mental Health, Occupational Therapy and Rothercare service users are not currently being offered a personal budget and are therefore not counting towards the score. This is very significant in Mental Health service as they support 1,400 service users in the community. Low take up of carers direct payments are also an issue (currently only 13 carers receive a direct payment out of a total of 370 of those provided with a service).

A performance clinic was held on 21st October. Remedial actions included:-

- Mental Health to commence self directed support (impact of between 4% and 17% could be added).
- Counting Rothercare reviews (impact of 8%)
- Looking at the OT process and capturing OT assessments (impact of 10%)
- Delivery against target on reviews.

 NI 132 (Vital Signs C12) Percentage of new service users assessed within 28 days of first contact with social services

Performance at the end of Quarter 2 (85.17%) is below the monthly control target of 90% and is rated 'Off target' for achieving the year end figure of 90%. Performance so far this year has 'Improved' compared to the same period last year (69.23%).

The introduction of OT activity, which was included from 12th July, has had the biggest impact on the figures and is the reason for current performance being off target. A performance clinic for the OT service has been arranged for 8<sup>th</sup> December.

The performance of Mental Health was raised at the RDASH monthly performance meeting on 22nd October and some actions were put in place to look at data quality issues that may be affecting the statistic. A remedial action plan has been agreed with RDASH to improve performance for Mental Health.

 NI 133 (Vital Signs C13) Percentage of new service users receiving their package of care within 28 from the date of assessment

Performance at the end of Quarter 2 (93.69%) is below the monthly control target of 96% and is rated 'Off target' for achieving the year end figure of 96%. Performance so far this year has 'Improved' compared to the same period last year (86.59%).

Of the customers who have received their care package this year, 61 waited over 28 days.

An 'end to end' review has commenced led by service directors including key people across the service. The scope of the review looks at access, assessment, review, support planning and safeguarding. The review will utilise systems thinking to identify a new structure/process for ensuring all reviews and assessments are carried out within customer defined timescales by mid November.

 NI 135 (Vital Signs C18) Carers receiving needs assessment or review and a specific carer service or advice and information

Performance at the end of Quarter 2 (13.14%) is below the monthly control target of 15% and is rated 'Off target' for achieving the year end figure of 30%.

Performance of Learning Disability and Mental Health services is below average. Inclusion of OT activity in denominator has meant additional carer assessments need to be undertaken this year in order to meet target and is responsible for the deterioration in performance. This is being addressed by the following actions:-

o Increase the rate of assessments captured from the Mental Health carers teams and capturing additional carers assessments from the Community Mental Health Teams. With this, the Mental Health contribution towards the indicator will be in excess of 20% by year end.

 A meeting has been held with Learning Disability services and they are developing a remedial action plan that will deliver 30% performance by year end.

#### 8. Finance

In order to address in-year budget pressures across the council a number of efficiecy savings have been proposed. None of these proposals will have an impact on performance.

#### 9. Risks and Uncertainties

There are a number of potential risks / uncertainties currently for Assessment and Care Management, these are:

- Implementation on new I.T. system for Adult Social Care from July, we began to roll out our new I.T. system for social care, "AIS". This is a replacement for the "Swift" database that has been in place since 2003 and represents a significant change for Social Work teams. A training programme has been put in place for all staff with full rollout planned during Quarter 4. This has a potential impact on performance as staff get to grips with the new system.
- Performance of the Community Occupational Therapy contract from the beginning of July we included the activity of the Community Occupational Therapy (O.T.) service in our performance indicators. This has had a negative impact on reviews, waiting times, self directed support and carers. Discussions are underway with Rotherham Community Health Service regarding the performance of the contract and a performance meeting has been set up to put in place remedial actions that will bring performance back on target.

## 10. Policy and Performance Agenda Implications

Future reports will reflect a more local focused suite of outcome measures and reflect current DoH thinking.

A number of announcements by Central Government have been made in the past quarter that have a direct impact on the way that performance in Adult Social Care is measured and assessed.

- o **Annual Performance Assessment** the Care Quality Commission announced on 3<sup>rd</sup> November that it will no longer conduct an annual assessment of councils' commissioning of social care under the existing framework. This means there will be no requirement for councils to submit evidence within the annual Self Assessment Survey for 2010/11.
- Local Area Agreement in October, councils were advised that all requirements to meet existing targets stated in councils' Local Area Agreements were to be revoked, together with any reward grant monies. This enables local authorities and their partners to amend or drop any of the current 4,700 LAA targets without needing ministerial agreement. Where the decision is to keep the targets locally, central Government will

have no role in monitoring them and will not be requiring local authorities to prepare an LAA from April 2011, once the current agreements expire.

- National Indicator Set councils were advised in October that the National Indicator Set was to be replaced from April 2011 with a single streamlined list of all data requirements (in the form of a mandatory data set). This will be published by CLG before April. The Government's aim is to make the data requirements placed on Local Government transparent and to review and reduce this for April 2011. Local Government will assist in this review, to help to ensure the list contains only the minimum of Central Government data needs. The NHS have recently started the consultation process with the publication of the document, "Transparency in outcomes: a framework for adult social care".
- Zero Based Review data submitted in the end of year statutory returns currently generates the results for all of the National Indicators for Adult Social Care. Although the National Indicator Set has been abolished the statutory requirement to continue to submit this data still remains. However, all of the statutory returns will be the subject of a "zero-based" review, which means the NHS Information Centre will be "starting from scratch" to consider what the essential requirements for council data will be. Our involvement in the Information Centre's Adult Review Group will inform this review of all data collections, to ensure the list is kept to the minimum, most important requirements.

## **Background Papers and Consultation**

The report has been discussed with Neighbourhoods and Adult Services Directorate Management Team. Appendix 'A' contains the performance results for the second quarter of 2010/11. The indicators rated 'on target' are shown as a star and those that are rated 'off target' are shown as a triangle.

#### Contact Names:

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# Appendix A - Neighbourhoods and Adult Services - Social Care Indicator Outturns for Sep'10 (Quarter 2) Key to symbols

Key to symbols									
_	indicator rated 'off target'	В	Banding						
*	indicator rated 'on target'	Q	Quartile						
⇧✓	indicator has improved	Q1	is worst						
Ûχ	indicator has deteriorated	Q4	is best						

RAG Status	<b>A</b>	*	?	Total 18.		
No. of indicators	7.	10.	1.			
Percentage	41. %	59. %		100. %		

			•													
	Commissioning and Partnerships (Chrissy Wright)								İ							
Line no	RAG Status	Measure	Good Performance	Banding/Q uartile	2009/10 Baseline	Jul '10 Result	Aug '10 Result	Sep '10 Result	This time last year	D.o.T. from same time last year	Sep '10 Target	2010/11 Target	Joint Indicator	Responsible Manager	Outcomes Framework	ì
1.	<b>A</b>	NI 136 (Vital Signs 03) People supported to live independently through social services (LAA)	Higher is better	Q1	2358.33	2363.1	2336.78	2334.36	2336.07	Û x	2801.5	3286	RDASH/ VCS	Dave Roddis	2	Ì
2.	*	NAS 5 Average waiting time for an OT assessment (calendar days)	Lower is better	N/A	16	19	20	22	18	Û×	28	28	NHS Rotherham	Jill Wilkinson	2	ì
3.	*	NAS 35 Percentage of homes graded silver or above through Home From Home	Higher is better	N/A	65.71%	65.71%	65.71%	65.71%	51%	û✓	71%	75%		Janine Parkin	7	ì
4.	*	NI 141 Percentage of vulnerable people achieving independent living (LAA)	Higher is better	Q4	88.17%	87.83%	-	89.04%	87.02%	Û×	85%	85%	Supporting People	Janine Parkin	2	i
5.	*	NI 142 Percentage of vulnerable people who are supported to maintain independent living	Higher is better	Q1	97.72%	98.93%	-	98.09%	98.59%	Û×	98%	98%	Supporting People	Janine Parkin	2	ì
		Health and	Well Being /	Assess	ment ar	nd Care I	Managen	nent (Sh	ona McF	arlane)						ì
Line no	RAG Status	Measure	Good Performance	Banding/Q uartile	2009/10 Baseline	Jul '10 Result	Aug '10 Result	Sep '10 Result	This time last year	D.o.T. from same time last year	Sep '10 Target	2010/11 Target	Joint Indicator	Responsible Manager	Outcomes Framework	ا اما
6.		NAS 1 (PAF D40) Percentage of clients receiving a review	Higher is better, 75<=100 is best	B 3/4 Q2	82.5%	22.75%	29.04%	36.83%	35.59%	û✓	45.62%	87%	RDASH	Lucy Pullen	1	
7.	<b>A</b>	NAS 18 (PAF D39) Percentage of people receiving a statement of needs	Higher is better, 100 is best	N/A	96.21%	96.12%	95.37%	96.08%	86.87%	û✓	97.29%	98%	RDASH	Cheryle Cartwright	4	
8.		NI 130 New Definition (Vital Signs 17) Social care clients receiving Self Directed Support	Higher is better	N/A	8.62%	13.37%	15.95%	22.51%	8.22%	û✓	25%	50%	RDASH	Cheryle Cartwright	4	1
9.		NI 132 (Vital Signs 12) Timeliness of social care assessment (all adults)	Higher is better	Q1	80.71%	91%	89.18%	85.17%	69.23%	û✓	90%	90%	RDASH	Mark Joynes	4	ì
10.		NI 133 (Vital Signs 13) Acceptable waiting times for care packages (now includes 18-64 age group)	Higher is better	Q2	94.23%	91.98%	91.74%	93.69%	86.59%	û✓	96%	96%	RDASH	Mark Joynes	4	ì
11.		NI 135 (Vital Signs 18) Carers receiving needs assessment or review and a specific carers service, or advice and information (LAA)	Higher is better	Q3	29.61%	10.55%	12.34%	13.14%	15.86%	Û <b>x</b>	15%	30%	RDASH	Mark Joynes	2	1
12.	*	NI 146 (Vital Signs 07) Adults with learning disabilities in employment	Higher is better	Q3	5.58%	.87%	1.16%	2.01%	.87%	û✓	1.88%	6.26%	No	Jackie Bickerstaffe	6	ì
13.	*	NAS 36 Number of safeguarding referrals	Lower is better	N/A	182	32	43	70	N/A	N/A	86	172		Julie Whincup	7	1
14.	*	NAS 46 Percentage of safeguarding cases substantiated at case conference	Higher is better	N/A	N/A	100%	93.02%	93.62%	N/A	N/A	75%	75%		Julie Whincup	7	1
15.	*	NI 125 (Vital Signs 04) Achieving independence for older people through rehabilitation / intermediate care	Higher is better	Q2	84.17%	83.54%	82.2%	85%	83.11%	û✓	82.8%	85%	NHS Rotherham	David Stevenson	2	i.
16.	*	NI 145 (Vital Signs 05) Adults with learning disabilities in settled accommodation	Higher is better	Q4	72.38%	10.77%	14.12%	25.14%	24.34%	û✓	22%	72%	Supporting People	Jackie Bickerstaffe	2	1
17.	*	NAS 41 Percentage of new staff undertaking safeguarding e-learning course within 12 weeks of commencing employment	Higher is better	N/A	N/A	%	85%	N/A	N/A	N/A	80%	80%		Sarah Blake	7	ì

#### **ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS**

1	Meeting:	Cabinet Member for Adult Independence, Health and Wellbeing
2	Date:	6 <sup>th</sup> December 2010
3	Title:	Skills for Sustainable Growth: Government Proposals for the Future of Adult and Community Learning
4	Directorate:	Children and Young People's Services

## 5 **Summary**

With the publication of Skills for Sustainable Growth the government has set out its strategy for the development of post-19 learning and its vision for the future of informal Adult and Community Learning. The intention is to reform informal Adult and Community Learning to encourage greater community involvement and the engagement of the most disadvantaged with progression routes to more formal learning. The details of this reform will be developed by the government over the next few months.

#### 6 Recommendations

That the government strategy for Adult and Community Learning be noted. That a further report regarding the impact of the strategy on the council's Adult Learning delivery be submitted when further information is available.

## 7 Proposals and Details

The proposals within *Skills for Sustainable Growth* reflect the intention to create a more responsive and flexible system, both to the needs of employers and the demands of learners.

The government recognises there is still a problem with the level of literacy and will continue to provide free training in Basic Skills for those who left school without them. The delivery of Basic Skills will be reviewed with a move away from targets to a focus on equipping individuals with the skills they need to get a job and play a full part in society.

Providers will be given greater freedom and expected to develop social partnerships with employers, local communities and the voluntary and community sector to deliver learning. Unfunded community groups, clubs and societies will be supported to organise their own learning, opening up new spaces as learning venues if desired.

It is expected that those coming from other countries to work in England or their employers should meet the cost of English language courses. Funding for ESOL will not be available in the workplace. Full funding for ESOL will only be available to those actively seeking work on Jobseekers Allowance and Employment Support Allowance. For others ESOL will be co-funded.

There are still 9.2 million adults in the UK (18%) who have not used the internet. All providers will be encouraged to support the broader agenda of getting as many people on line as possible by 2012. The most disadvantaged will still be supported to do this through free short courses, either as part of other accreditation or through Adult and Community Learning.

The government recognise the importance of informal Adult and Community Learning in developing skills and in improving community engagement. Future funding will be prioritised to those people who need the most help and have had the fewest opportunities. Most learners will need to at least part and in many cases fully fund their learning. The intention from 2012/13 is to move to co-funding of a first Level 2 qualification for those aged over 24 years. Any subsequent Level 2 qualification will be co-funded. From 2013/14 Level 3 qualifications and above for those over 24 years of age will be funded through the new loans.

Every adult will be offered a Lifelong Learning Account. This will offer access to the new FE student loans and other financial support, for example, an enhanced learner support fund. This account will also offer incentives for learning, including a means of recognising the social contribution made through volunteering.

A new all-age career service will be established working in partnership with Jobcentre Plus to help jobseekers improve their skills. An integrated system of online support for employers will be available through the Businesslink website. This will allow employers to access diagnostic tools to help them make decisions on training that meets their business needs.

#### 8 Finance

The current level of funding for the academic year 2010/11 for each of the budgets under Adult Safeguarded Learning is:

- Neighbourhood Learning in Deprived Communities (£118,498)
- Personal and Community Development Learning (£247,547)
- Wider Family Learning (£57,860)
- Family Literacy, Language and Numeracy (£138,000).
- First Steps (£79,092)
- Family Learning Impact Funding (£103,600)

From the academic year 2011/12 four components of the Adult Safeguarded Learning budget will be combined into a single budget line. The four components to be combined are the budgets for:

- Neighbourhood Learning in Deprived Communities (NLDC)
- Personal and Community development Learning (PCDL)
- Wider Family Learning (WFL)
- Family Literacy, Language and Numeracy (FLLN).

Funding allocations will be based on historical allocations and delivery data, but adjusted in line with the policy direction set out in *Skills for Sustainable Growth*. Funding at national level will be maintained at the 2010/11 rate of £210,747 for 2011/12 and 2012/13. Funding at local level and the associated targets and learner numbers are not yet known. Similarly the government are committed to reducing the number of providers of adult learning with direct contracts with the Skills Funding Agency.

## 9 Risks and Uncertainties

Until the funding levels and required outcomes are set future delivery and the role of the local authority is unclear.

## 10 Policy and Performance Agenda Implications

Adult Safeguarded Learning funding targets as set by the Skills Funding Agency.

## 11 Background Papers and Consultation

Skills for Sustainable Growth – Department for Business Innovation and Skills (Nov 2010)

Further Education – New Horizon Investing in Skills for Sustainable Growth (Nov 2010)

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COMMITTEE/AATEMPLATE