

ADULT SOCIAL CARE, CHILDREN'S SERVICES AND EDUCATION COMMITTEE
3 FEBRUARY 2016

Present: Councillor McElligott (Chair)
Councillors Ballsdon, Eden, D Edwards (for items 39 and 41 to 45 only), Ennis, Gavin, Hoskin, O'Connell (for items 36 to 40 only), Pearce, Stanford-Beale, Vickers and White

Apologies: Councillors Jones and Orton

36. CHILDREN'S SERVICES UPDATE

The Director of Children, Education and Early Help Services submitted a report providing the Committee with an update on the progress made within the Children, Education and Early Help Directorate. A copy of the Framework for Improvement was attached to the report at Appendix 1, a copy of the Children's Services Improvement Plan was attached at Appendix 2 and a copy of the LEAP Vision was attached to the report at Appendix 3.

The report explained that the interim appointment of the Director of Adult Services as the Director of Children's Services at the end of November 2015 had been followed in December 2015 by the securing of a new senior management team. This had included the appointment of Head of Early Help. The Head of Safeguarding and Children in Care and the Head of Education were also appointed alongside additional experienced interim capacity in the Head of Transformation and Governance role and the new Director of Children's Services had taken up their post on 1 February 2016. The recent permanent recruitment of the Principal Social Worker would act as a custodian of social work practice and development and a permanent Service Manager for the Multi Agency Safeguarding Hub and Access and Assessment had started in post in January 2016.

A short term intensive management action plan had been implemented in December 2015 and had been delivered to ensure that work was consolidated and delivered to a high standard. This had been monitored through the Children's Services Improvement Board. All vacancies within the social work teams had been filled and the caseloads in the long term teams were now within 'reasonable' caseload limits. Caseloads in Access and Assessment had remained high but had been reduced by 50% since November 2015 and the development of the 'LEAP' Vision alongside staff had focused the service on the delivery of the key aims of Children's Services.

The report explained that since the development of the 'dashboard' for Looked After Children (LAC) performance had seen a clear improvement as managers and staff could review their performance in 'live time' and use it to secure performance for individual children. The Performance Team were concentrating efforts to deliver dashboards for Child Protection and for Children in Need. Management oversight was having the benefit of focusing staff on delivering to timescales and in early January 2016 some of the teams were reporting 100% of visits within timescales, performance which had not been attained since early 2015.

Over 80% of assessments had been completed within timescales and stability for LAC was improving. Over 90% of LAC Health Assessments had been completed, this included children who lived out of the Borough.

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Three staff development days had been held in December 2015 and early January 2016 where staff had said what made them proud about working for Reading. Key areas of good practice had been reported and it was demonstrated that staff were focused on and committed to making a difference to the lives of children and young people.

The report stated that the Children's Services Improvement Board had consolidated its membership with regular attendance from the Heads of Service, the Director of Children's Services, the Managing Director and partners from the Police, Health and Headteacher representation. The action plan had been refreshed to take account of the fact that a number of items had been completed with the short term management action plan. Several actions had had their deadline for completion extended and Heads of Service were taking accountability for reporting on the actions within specific themes. The short term management action plan had included the refresh of the Quality Assurance Framework, the delivery of the SGO Policy, the securing of the performance dashboards and the development of a staff forum. As a result partner perception at the Children's Services Improvement Board had been that the Service had delivered a huge amount in the previous two months. It has also been reported that the Judiciary were also noticing a positive change in performance.

Resolved -

- (1) That the progress made within the Children, Education and Early Help Directorate since the last update be noted;
- (2) That an update report be submitted to the Committee in summer 2016.

37. CHILDREN'S SERVICES PERFORMANCE UPDATE

Further to Minute 17 of the meeting held on 5 November 2015 the Director of Children, Education and Early Help Services submitted a report providing the Committee with an update on the progress made within the Children, Education and Early Help Directorate in respect of performance. A LAC summary snapshot from 31 January 2016 was tabled at the meeting.

The report stated that the development of a performance dashboard for LAC had helped to improve performance by enabling managers to have a 'real time' view of performance within the team. Through the use of the dashboard managers were able to see the exceptions in performance and view individual children's records to ensure that progress was made and it had become a useful management tool within a short period of time. As performance was now based on current data it meant that the service could be much more proactive about performance than it had been previously and viewing performance in this way had had results in regard to the number of visits to LAC on time, the number of children with an up to date care plan and the number of children who had had their health assessments.

The report explained that the monthly operational Performance Board considered the performance and provided critical challenge to the Service and following this meeting a commentary was added to the dashboard and this final data was saved as

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the overview of that month's performance. This agreed data was then used to inform the Corporate Performance Report and performance for the Children's Services Improvement Board.

Further dashboards had been commissioned for Child Protection and for Children in Need to assist managers in having oversight in these key areas.

Resolved -

- (1) That progress made within the Children, Education and Early Help Directorate since the last update and the use of performance dashboards be noted;**
- (2) That the use of the dashboard in improving performance be monitored.**

38. QUALITY ASSURANCE FRAMEWORK REFRESH

The Director of Children, Education and Early Help Services submitted a report on the Quality Assurance Framework Refresh that built on the emphasis of quality and refreshed the Directorate's approach to performance and to quality assurance. A copy of the Quality Assurance Framework was attached to the report at Appendix 1.

The report stated that a strong quality assurance framework would assist the organisation to deliver an efficient and effective service. The framework, if applied correctly, would assist managers and the organisation to ensure:

- Vulnerable children, young people and their families' outcomes were improved;
- Services were achieving consistently high standards;
- Services were regularly monitored, reviewed and evaluated;
- The organisational culture was committed to learning and continual development;
- The continuous improvement and development of the children's workforce.

The report explained that quality assurance was part of a continual cycle of improvement. Audit was one component of quality assurance and surveys, consultations, focus groups and direct observations were other ways in which a base line understanding of the service could be established. The Directorate had agreed that in order to deliver the framework operational boards would be set up that would fit neatly into the performance and business planning cycles. A series of monthly operational boards would be summarised and themes fed into a quarterly operational quality assurance board. At the quarterly board Heads of Service and key Service Managers would receive feedback from performance reports, audits, complaints, Independent Reviewing Officer escalations, service user feedback, quality of commissioned provision and themes that had arisen from supervision. The themes would be collated from this information and would be prioritised into a work plan that would inform the service plans and would input directly into the Learning and Development framework to secure continual improvement. It would also determine what activity needed to take place, for example, whether a process needed to be refreshed, a multi-agency audit needed to be carried out, or whether

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further consultation needed to be carried out or focus groups set up with service users.

The report stated that Quality Assurance and performance reports would be available through the normal Corporate Performance Reporting systems.

Resolved -

- (1) That the Quality Assurance Framework for use in the Children, Education and Early Help Directorate be noted;**
- (2) That the Quality Assurance Framework and ongoing annual reports be submitted to the Audit and Governance Committee.**

39. SHORT BREAKS COMMISSIONING PROCESS 2016-17

The Director of Children, Education and Early Help Services submitted a report that set out the plan to create a more personalised approach to short breaks services through the creation of unique and individualised packages for families. Details of the process for the consultation on short breaks was attached to the report at Appendix 1.

The report stated that a consultation process would determine a timeline but the aim was to have the new process in place by the end of the 2016/17 financial year. In 2015/16 the Council's spend on short breaks had been £102,000. This budget had supported around 200 families using short breaks services. The number of young people in the Borough aged 0 to 19 living with a disability or longstanding illness had been estimated at 6,635. Better value for money through improved choice and control for service users would be achieved by delivering services through Direct Payments to those who were eligible.

Discussions with family forums, the voluntary sector and short break providers would take place from February to June 2016 and the Council would identify the organisations, groups and families that would be affected. Families who were not currently receiving a short break as well as those who did would need to be engaged with to ensure equality of access based on assessment of need. Families would be made aware of the full scope and options involved in the Direct Payment process and given links to the Family Information Service. The Service would give families options on where a wide range of short breaks could be purchased.

The report explained that providers would go through a bidding process to demonstrate how they planned to run the new Direct Payment funded short break groups. The Council would be represented at meetings for key stakeholders to explain what this bidding process would look like. Consultations would identify any stand-alone services that would need to be commissioned to ensure families' choices could be met. It was anticipated that tendering would commence from June 2016.

Resolved - That the proposal for the Council to evolve the current short break grants mechanism into specified contracts and to start providing short break services through Direct Payment be approved.

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(Councillor Stanford-Beale declared an interest in this item, left the meeting and took no part in the debate or the decision).

40. PERMISSION TO BEGIN FAMILY SUPPORT CONSULTATION

The Director of Children, Education and Early Help Services submitted a report that outlined the purpose and nature of the proposed first stage of consultation on the Council's future family support offer.

The report explained that the consultation process would be an important process to complete a review of the range of family support and Children's Centre services what were available to families across the Borough. The objectives of the review were as follows:

- To identify the current and potential future needs of children and young people in the Borough that would enable a clear set of priorities for resources/spend on services going forward;
- To understand the role of the Council's family support and how this tied with other providers as well as social worker support;
- To understand the role of Children's Centres, the offer of support and services for each part of the Borough;
- To recommend a service offer for families from the Council;
- To complete an equalities assessment that understood the impact of recommendations on protected groups.

Consultation would take place with local families that had used family support and Children's Centres services as well as attempting to work with families who had not. The consultation would begin in March 2016 and finish by the beginning of May 2016. The consultation would take the form of interviews and small group discussions using staff to lead the conversations and gather feedback and views which would be collated to shape and review recommendations. The type of questions that would be discussed with families were as follows:

- What were the key positive outcomes of successes that your children and you needed help with in the Borough;
- What were the key priority areas of need or risks for children and your family which might limit their success of achieving positive outcomes;
- Who were the important target groups of families that the Council must work with;
- What were the key services what made the biggest differences to families and children in the Borough.

Resolved - That a consultation process with staff and families to explore and recommend a future family support offer that will be reported back to Committee in summer 2016 be approved.

41. ADULT SOCIAL CARE COMMISSIONING INTENTIONS 2016-17

The Director of Adult Care and Health Services submitted a report that introduced a summary of the Adult Social Care Commissioning Intentions for 2016-17. A draft of

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the Adult Social Care Commissioning Intentions 2016-17 was attached to the report at Appendix A.

The report explained that the commissioning intentions served to set out for all potential and current providers the information and intelligence that would enable businesses to plan how they might offer to meet the assessed needs of vulnerable people in the Borough in future tenders and contract negotiations. The Commissioning Intentions also provided opportunity for commissioning authorities to ensure alignment. Once they were approved and alignment had been agreed the document would be published and shared with partners and providers to assist in service planning for the coming year.

The document outlined the Council's Commissioning Intentions for the coming financial year and the commissioning activities carried out during this period would serve to inform the next round of Commissioning Intentions for future years. The Commissioning Intentions did not constitute a contractual obligation to providers and could be amended at any time. They were intended to support providers in their planning as required under the market management duties under the Care Act.

Resolved - That the Adult Social Care Commissioning Intentions for 2016-17, in order that a final version can be published and shared with partners and providers, be approved.

42. READING BOROUGH COUNCIL STRATEGY FOR PEOPLE WITH LEARNING DISABILITIES

The Director of Adult Care and Health Services submitted a report asking the Committee to agree the Council's Strategy for People with Learning Disabilities. A copy of the draft Strategy for people with learning disabilities was attached to the report at Appendix 1 and included a strategic vision, needs analysis and implementation plan.

The report stated that the aim of the Strategy was to outline the key priorities for the delivery of support for learning disabled people in the Borough, incorporating the priorities that had been expressed by the Learning Disability Partnership Board, the Corporate Plan and the Adult Social Care Strategy. These priorities were intended to meet the needs that had been identified in the associated Needs Assessment.

The report explained that the vision was to enable people with learning disabilities in the Borough to maximise their opportunity for inclusion within their local community and to support them to grow and develop as individuals. A strengths based approach would be taken, taking the starting point as considering what people could achieve now for themselves, what they could achieve with support and, where possible, what they could achieve independently in the future.

The strategy had an implementation plan that brought together all the actions that had been established from the strategy and needs analysis to ensure the Strategy was taken forward. The key areas of the Strategy were as follows:

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- Re-shaping the accommodation offer to give people alternative options to residential care;
- Furthering personalisation and independence within people's own communities;
- Developing support for carers;
- Embedding the Care Act 2014 requirements.

Resolved - That the Reading Borough Council Strategy for People with Learning Disabilities be agreed.

43. CONTINUING HEALTHCARE FUNDING

The Director of Adult Care and Health Services submitted a report informing the Committee of the operation of national Continuing Health Care (CHC) guidance locally and recommending a scrutiny enquiry to review local practice.

The report explained that the effective application of CHC and NHS Funded Nursing Care guidance supported residents who met the criteria to have their rights to health care free at the point of delivery in the same way as access to all other health care support via the NHS. CHC was not means tested and therefore an individual who was in receipt did not have to pay a contribution towards their care. In Reading, along with two neighbouring local authorities, the level of provision on NHS funded CHC was significantly lower than average. This had an adverse impact on the Council's ability to ensure the financial sustainability of the Council as the Council was paying a larger proportion of high care placements than other local authorities.

In 2012 a review that had been carried out by the Department of Health had noted that Berkshire had the lowest level of eligible recipient of CHC in England and since 2010 the Council had funded a post to actively pursue the applications for CHC. The Council had now entered an agreement for Wokingham Borough Council to oversee a team of CHC workers as part of 'an invest to save' proposal with the anticipated plan that the Council would be able to support individuals to achieve CHC. This had come into place from January 2016.

The report recommended that a scrutiny task and finish group be set up to consider the impact of the significantly lower level of funding of CHC for eligible individuals and to consider issues and actions which could be taken to ensure effective and equitable operation of the guidance. The report also recommended that the remit of the group should be to explore the following areas:

- Compare the local process with comparator groups;
- Determine the differences in application of the national guidance;
- Analysis of the impact and difference of what it meant for the individual and the local authority and what was the impact on the Adult Social Care budget;
- Develop a recommended action plan to be submitted to a future meeting.

The review would have to be carried out with the support of the Council's operational teams and the Clinical Commissioning Group, whose role it was to deliver the CHC service.

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Resolved -

- (1) That the setting up of a scrutiny task and finish group to determine the local operation of national Continuing Health Care and NHS Funded Nursing Care guidance compared to our comparators be approved;
- (2) That a task and finish group be established, with the membership as set out below, to consider the impact of the significantly lower level of funding on Continuing Health Care on eligible individuals and to consider issues and actions which would be taken to ensure effective and equitable operation of the guidance:

Councillors Hoskin, Gavin and Stanford-Beale;

- (3) That Councillors O'Connell and White inform the Chair who would be taking a place on the task and finish group;
- (4) That the task and finish group present their findings and recommendations to a future meeting.

(Councillor White declared an interest in this item, left the meeting and took no part in the debate or the decision).

44. BETTER CARE FUND UPDATE

The Director of Adult Care and Health Services submitted a report informing the Committee of the Better Care Fund (BCF) and the National Conditions that would inform plans for 2016-17. A copy of the BCF National Conditions was attached to the report at Appendix A and a copy of the BCF National Metrics was attached to the report at Appendix B.

The report explained that in 2016/17 the BCF would be increased to a mandated minimum of £3.9m which would be deployed locally on health and social care through pooled budget arrangements between local authorities and Clinical Commissioning Groups (CCG). There were some key differences from the previous year, in place of the performance fund there would be two new national conditions requiring local areas to fund NHS commissioned out-of-hospital services and to develop a clear focused plan of management in delayed transfer of care (DTC) including locally agreed targets. In addition the previous BCF plan assurance process had been removed and replaced with a less onerous local assurance process aligned to the assurance process for local CCG Operating Plans.

For 2016/17 the Council would be required to develop and agree through the Health and Wellbeing Board the following:

- A short jointly agreed narrative plan;
- Continued funding contributions from the local authority and CCGs;
- Spending plans broken down by each BCF scheme;
- Quarterly plan figures for the national metrics.

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In lieu of the final 2016/17 BCF guidance from the Department of Health it was not possible to fully anticipate all likely planning and submission requirements and work was ongoing with CCG colleagues to prepare for the 8 February 2016 deadline.

The preliminary guidance that had been seen had indicated that the 2016/17 narrative should build on the approved 2015/16 plan and demonstrate that local partners had reviewed progress in the first year of the BCF as the basis for developing plans for 2016/17. Work would also be carried out with the CCG to draft the scheme level spending plan which would be required to account for the use of the full value of the budgets pooled through the BCF.

The report explained that work remained to benchmark and set targets for the key performance metrics and in addition BCF plans would need to establish a Health and Wellbeing Board level Non-Elective Admission activity plan.

The report included the current BCF plan submission and assurance timetable and explained that the submissions would need to be signed off by the Chair of the Health and Wellbeing Board.

Resolved - That the current position of the 2016-17 Better Care Fund and potential financial risks to the Council be noted.

45. DELAYED TRANSFER OF CARE - PROGRESS REPORT

The Director of Adult Care and Health Services submitted a report informing the Committee of the work that had been carried out to reduce delayed transfers of care (DTOC) from the Royal Berkshire Hospital and develop "discharge to assess" pathways which reduced the need for long term care.

The report explained that many of the mitigating actions that had been taken over the Christmas period from community health and social care had focused around how people were supported to leave the hospital setting in a timely manner. However, locally 25% of the activity from the Community Reablement Team was to support people to stay at home who would have ordinarily been admitted to hospital.

Adult Social Care had received £100k following a successful bid to the CCG and this had been used to temporarily recruit a Social Worker, Occupational Therapist, an additional Extra Care Sheltered Housing Assessment Flat and additional staff for the Willows Residential Home. The service had also carried out changes to practice to ensure flow through the Health and Social Care system was safe, efficient and timely and that individuals were offered reablement prior to any decision on long term care needs. This had included the following:

- A Senior Social Worker role was created in the Intermediate Care Team;
- Social Worker cover in the hospital at the weekend;
- A dedicated worker for both the Community Hospital and the Discharge to Assess service based at the Willows Residential Home;
- A community and bed based reablement.

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With regard to the Christmas period, when historically higher numbers of people were referred to hospital, there had been over 100 admissions over the holiday periods that had peaked at 135 on one day. In addition the local authority had taken a proactive approach in preparation for the Junior Doctors strike on 12 January 2016 and the report detailed the measures that had been taken. On the day of the strike there had been five people waiting to be discharged with two of these being discharged on the day and on the subsequent day there had been nine people referred for discharge, with three people discharged on that day and four others having discharge plans in place. As a result of these measures the Council's performance in relation to DTOC had been lower than the previous year.

Finally, the report stated that an internal review of the BCF schemes had been completed. These had been discussed at the Reading Integration Board and agreement had been reached to take these forward, the report detailed the areas that would be reviewed.

Resolved - That the progress made in reducing delayed transfers of care and supporting individuals regain their independence prior to making decisions about long term care needs be noted.

(Councillor White declared an interest in this item).

(The meeting commenced at 6.30 pm and closed at 9.10 pm).