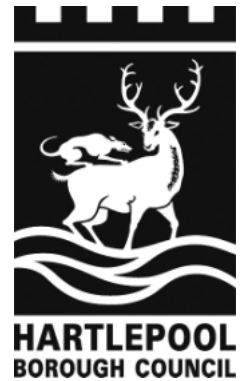


ADULT SERVICES COMMITTEE AGENDA



Monday 4 November 2013

at 10.00 am

in Committee Room B, Civic Centre, Hartlepool

MEMBERS: ADULT SERVICES COMMITTEE

Councillors Fisher, Hall, A Lilley, Loynes, Richardson, Shields and Sirs

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 To receive the Record of Decision in respect of the meeting held on 7 October 2013 (*attached for information*)

4. BUDGET AND POLICY FRAMEWORK ITEMS

No items

5. KEY DECISIONS

No items

6. OTHER ITEMS REQUIRING DECISION

No items



7. ITEMS FOR INFORMATION

- 7.1 Annual Complaints Report 1 April 2012 – 31 March 2013 – *Assistant Director, Adult Services*
- 7.2 S136 Mental Health Act (MHA) 1983/2007 Place of Safety – *Assistant Director, Adult Services*
- 7.3 Tees Place of Safety Scheme – *Assistant Director, Adult Social Care*
- 7.4 Savings Programme 2014/15 – Adult Services – *Assistant Director, Adult Services*
- 7.5 Strategic Financial Management Report as at 31 August 2013 – *Director of Child and Adult Services and Chief Finance Officer*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

ITEMS FOR INFORMATION

Date of next meeting – 25 November 2013 at 10.00am in the Civic Centre, Hartlepool



ADULT SERVICES COMMITTEE DECISION RECORD

7 October 2013

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

Present:

Councillor: Carl Richardson (In the Chair)

Councillors: Keith Fisher, Brenda Loynes and Linda Shields

In accordance with Council Procedure Rule 5.2 (ii) Councillor G Lilley was in attendance as substitute for Councillor A Lilley and Councillor Barclay was in attendance as substitute for Councillor Hall

Also Present: Councillor Beck

Steve Thomas, Maureen Lockwood and Ruby Marshall, Health Watch

Nigel Ingram and Jacqui Dale, Joseph Rowntree Housing Trust

Officers: Jill Harrison, Assistant Director, Adult Services
Geraldine Martin, Head of Service, Adult Social Care
Janet Dickinson, User Property & Finance Team Manager
Trevor Smith, Performance and Information Manager (Adults)
Denise Wimpenny, Principal Democratic Services Officer

36. Apologies for Absence

Apologies for absence were submitted on behalf of Councillors Hall and A Lilley.

37. Declarations of Interest

Councillors Beck and Fisher declared a personal interest in Minute 39.

38. Minutes of the meeting held on 9 September 2013

Received.

39. Presentation: Issues Arising from the Last Meeting regarding Hartfields *(Representatives from Joseph Rowntree Housing Trust)*

Type of decision

For information only

Issue(s) for consideration

The Chair welcomed representatives from Joseph Rowntree Housing Trust / Hartfields who had been invited to attend as a result of concerns raised at the last meeting.

A representative from Hartfields reported that whilst it was not their intention to provide a presentation to Members today, they were happy to answer any subsequent queries Members may wish to raise.

A Member shared with the Committee written complaints from residents of Hartfields regarding the ongoing problems in relation to the heating system and more recently the inability of residents to leave the building due to the breakdown of a lift. Concerns were expressed that the problems with the heating system had existed since the facility opened in 2008 and whilst it was acknowledged that works had recently been undertaken to address this problem it was too early to determine whether the works had been successful. It was noted that, according to a resident survey in May this year, 46% of residents were using portable heaters which highlighted the inadequacy of the heating system. The impact on residents as a result of the recent lift problem was also discussed. Whilst the support arrangements provided by Hartfields during the breakdown period were welcomed, Members were of the view that the inability for some residents to leave the building for 13 days was unacceptable.

Further concerns were raised by Members in relation to the impact on individual's health and wellbeing, as well as the potential increase in hospital admissions as a result of the inadequacy of the heating system. The financial concerns of residents in terms of heating costs were also shared with the Committee.

The representatives from Hartfields responded to a number of queries raised by Members in relation to the measures that had been taken to address the issues. These included the refurbishment of heating units in every home, installation of data loggers on heating systems and installation of larger radiators in accordance with residents' requests. Assurances were given that the heating system was now fit for purpose and arrangements could be made to tailor the system to meet individual requirements. A query was raised regarding the length of time for carrying out repairs in the event of a breakdown in the heating system. The representative indicated that

upgrade works were currently taking one day. The current heating system at Hartfields was different to traditional heating systems and had presented some user difficulties as well as technical challenges. Support arrangements in terms of operating the system had been introduced to alleviate the problems.

In response to concerns raised by residents regarding the cost of heating their homes and the inability of residents to choose a preferred energy supplier, Members were advised that the running costs of the current heating system in Hartfields were more economical than the cost of heating a traditional home. The Committee went on to discuss the various options available for monitoring room temperatures.

In relation to concerns that 46% of residents surveyed were utilising portable heaters, the representatives from Hartfields agreed to undertake a further survey following the forthcoming winter and to clarify usage figures to the Committee.

Following further discussion in relation to the unacceptable length of time that the lift had been out of action, the representative from Hartfields agreed to explore the reasons for the lengthy delay in undertaking the repairs and provide a written response to the Committee outlining the measures that would be introduced to prevent any reoccurrence of this type in future.

Decision

That the information given be noted and further information be awaited in response to concerns of the Committee.

40. Adult Social Care Outcomes Framework – Results of User Surveys 2011/12 and 2012/13 *(Assistant Director, Adult Services)*

Type of decision

For information only

Purpose of report

To provide the Committee with a summary of the results from the Adult Social Care Survey and the related Adult Social Care Outcomes Framework (ASCOF) measures, identifying how 2012/13 performance compares with the previous year and showing comparison data from other Councils in the North East.

Issue(s) for consideration

The report included background information in relation to the introduction of the Adult Social Care Outcomes Framework. Performance and comparison data from the Adult Social Care Survey (for users of social care services) showed that Hartlepool's position compared to other North East councils had improved in all six outcome measures. Comparison data for 2011/12 and 2012/13 for the twelve North East Councils was attached at Appendix 1.

It was reported that Hartlepool was now the best performing authority in the region for two of the measures – 3A: Overall satisfaction of people who use services with their care and support and 3D: Proportion of people who use services and carers who find it easy to find information about services. A national comparison of results for outcome 3A was attached at Appendix 2. Performance had declined slightly in relation to one outcome – 4A Proportion of people who use services who feel safe. This was an outcome where four other local authorities had seen a decline and because it did not relate to services it could reflect how people felt generally about a number of factors. While Adult Services may not be able to influence all of these factors, work would continue to understand why people may not feel safe with a view to introducing appropriate measures to address these concerns where possible.

In response to a query relating to the reliability of the data in terms of response rates, the Assistant Director referred Members to Appendix 2 of the report which highlighted the level of responses by authority. Given the response rate of 300 individuals (30%) for Hartlepool, Members were assured that such a response rate was classed as statistically reliable.

A lengthy discussion ensued in relation to the timescales allocated for domiciliary care visits following recent coverage in the national press regarding 15 minute visits. Members discussed the impact on individual care as a result of the limited time allocated and issues regarding scheduling of care visits. Representatives from Health Watch updated the Committee on the overall findings of the survey they had undertaken of users of domiciliary care, which showed that people were generally happy with the quality of domiciliary care. Three key issues were highlighted through the survey; the impact of carers travelling time on care provision, the importance of continuation of care when staff were on leave or sick leave and the importance of communicating delays and changes. The importance of training provision for domiciliary carers was also discussed.

The representative from Health Watch confirmed that detailed findings would be presented to a future meeting of this Committee. The Assistant Director responded to queries raised by Members and indicated that in order to facilitate further discussion in relation to the issues raised regarding domiciliary care, further information would be provided to a future meeting of this Committee, along with the Health Watch report.

Members were pleased to note that Hartlepool was the third best performing authority in the country in relation to outcome 3A and took the opportunity to congratulate officers for their hard work in achieving such high levels of performance.

Decision

That the contents of the report and performance of Adult Services for 2011/12 and 2012/13 be noted.

41. Review of Contribution Policy for Non Residential Services *(Assistant Director, Adult Services)*

Type of decision

For information only

Following the consultation process, a further report will be submitted to the Adult Services Committee on 6 January 2014 regarding implementing a revised Contribution Policy from April 2014. This will be a key decision.

Purpose of report

To provide the Adult Services Committee with information regarding the current Contribution Policy and proposals to review the Policy to achieve additional income from April 2014.

Issue(s) for consideration

The report provided background information in relation to the legislative framework and the Council's current Contribution Policy. The proposal that would be put forward for consultation was to increase the amount that people contributed to the costs of their care package, according to their means. This would generate additional income of £158,000 - £175,000 per year if the threshold was increased to 95% or additional income of £196,000 - £218,000 per year if the threshold was removed. Details of the approximate number of people affected and by how much was provided as detailed in the report. A copy of the Contribution Policy consultation document was attached as an appendix to the report.

The Assistant Director provided clarification in response to queries raised by Members regarding the consultation, the impact on service users and provided assurances that the proposals were unlikely to impact upon the level of take up of services. Members acknowledged that the proposals, if

implemented, would contribute to the challenging savings target set for adult services.

Decision

- (i) That the Adult Services Committee note the proposed change to the Contribution Policy and the planned consultation process.
- (ii) That a further report be received on 6 January 2014, following consultation, to make a decision regarding implementation of the revised Contribution Policy from 1 April 2014.

The meeting concluded at 11.15 am.

P J DEVLIN

CHIEF SOLICITOR

PUBLICATION DATE: 14th October 2013

ADULT SERVICES COMMITTEE

4 November 2013



Report of: Assistant Director for Adult Services

Subject: ANNUAL COMPLAINTS REPORT
1st April 2012 – 31st March 2013

1. TYPE OF DECISION/APPLICABLE CATEGORY

For information.

2. PURPOSE OF REPORT

- 2.1 To present the Annual Complaints Report of the Child and Adult Services Department on complaints and representations for the period 1 April 2012 to 31 March 2013.
- 2.2 The Annual Report is attached as **Appendix 1** to this report.

3. BACKGROUND

- 3.1 The Annual Report provides information on the complaints and representation frameworks appropriate in the department. It draws together information in relation to complaints that have been received and dealt with during the reporting period.
- 3.2 The report includes details of complaints relating to Children and Community Services. These come within either a statutory framework or the Authority's Corporate Complaints Framework and are also reported to their respective Policy Committees.

4. PROPOSALS

- 4.1 The report offers an opportunity to demonstrate learning that has occurred from complaints and also consideration of trends emerging through the year's activity within the Complaints Framework.

4.2 The content of the Report includes the following areas:

- Types of complaints and representations received 2012/13
- Profile data on service users who were the focus of the complaints
- Outcomes of complaints
- Compliance with timescales
- Learning lessons and service improvement

4.3 The Report provides an analysis of recorded complaints, compliments and representations and draws comparisons with the previous year. Performance is highlighted in a range of areas so that practice issues may be considered.

5. RECOMMENDATIONS

5.1 That the Annual Report is noted and online publication agreed.

7. REASONS FOR RECOMMENDATIONS

7.1. It is a legal requirement in both adult and children's social care that an Annual Report be published on complaints, presented to the relevant Policy Committees and made available to staff, the Care Quality Commission (CQC), Ofsted and general public.

8. CONTACT OFFICER

Leigh Keeble
Development Officer, Child and Adult Services
Email: leigh.keeble@hartlepool.gov.uk



Complaints, compliments and representations report 1 April 2012 - 31 March 2013

Hartlepool Borough Council
Child and Adult Services



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1. Introduction

Welcome to Hartlepool Borough Council's Child and Adult Services Department's Complaints, Compliments and Representations Annual Report. The report covers the period 1 April 2012 to 31 March 2013 and is for adult social care, children's social care and community services.

The report will be presented to the appropriate Committees: the Adult Services Committee; the Children's Services Committee; and Regeneration Services Committee. It will also be provided to the Care Quality Commission (CQC), Ofsted, and made available to members of the public and Child and Adult Services staff on the Internet at www.hartlepool.gov.uk.

The report outlines:

- Details of the complaints and compliments received over the reporting period;
- Lessons learned and resulting improvements following enquiry into complaints;
- Performance in relation to our handling of complaints.

2. Background

Complaints and compliments are valued as an important source of feedback on the quality of services. Each complaint is investigated and, where appropriate, redress made. Equally important is the work to learn lessons to prevent a repeat of failure in service quality and continually improve services.

2.1. What is a complaint?

A complaint is any expression of dissatisfaction about a service that is being delivered, or the failure to deliver a service. The Local Government Ombudsman defines a complaint as *"an expression of dissatisfaction about a council service (whether that service is provided directly by the council or on its behalf by a contractor or partner) that requires a response."*

A complaint can be made in person, in writing, by telephone or email or through the council's website. It can be made at any office. Every effort is made to assist people in making their complaint and any member of staff can take a complaint.

2.2. Who can complain?

A complaint can be made by:

- A person who uses services
 - A carer on their own behalf
 - Someone who has been refused a service for which they think they are eligible
 - The representative of someone who uses services or a carer acting on their behalf.
- This could be with the consent of the service user or carer or in the case of someone who does not have the capacity to give consent, where they are seen to be acting in the best interests of that person.

- Anyone who is or is likely to be affected by the actions, decisions or omissions of the service that is subject to a complaint.

3. Child and Adult Services complaints frameworks

Hartlepool Borough Council's Adult and Children's Social Care, Children's Services and Community Services complaints framework is derived from the statutory procedure for complaints relating to Adults and Children's social care and the corporate complaints procedure for those relating to Community Services. The overall responsibility for the three areas rests with the Department's Complaints Manager/Assistant Director (Community Services). The remit of the Complaints Manager is:

- Managing, developing and administering the complaints procedures.
- Providing assistance and advice to those who wish to complain.
- Overseeing the investigation of complaints that cannot be managed at source.
- Supporting and training staff.
- Monitoring and reporting on complaints activity.

The framework covers situations where there is dissatisfaction about actions, decisions or apparent failings of services within the department.

3.1. Adult Social Care complaints framework

A single level integrated complaints process was introduced on 1 April 2009 with the implementation of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

These regulations place a duty on NHS bodies and adult social care organisations to coordinate handling of complaints and to advise and support complainants through the procedure.

A joint protocol for the handling of complaints that span more than one health or social care organisation had been developed to ensure a comprehensive response is provided to complaints that cross more than one organisation.

The complaints procedure aims to be as accessible as possible. The policy is flexible to ensure that the needs of the complainant are paramount and allows the Department and the complainant to agree on the best way to reach a satisfactory outcome. Full details of the complaints policy and procedure are available on the council's website. Briefly, on receipt of a complaint the level of impact is determined and complaints screened according to their content as being red (high impact), amber (moderate impact) or green (low impact). The process for handling the complaint is dependant on the impact.

3.1.1. Timescales for the resolution of complaints

Staff will always try to resolve problems or concerns before they escalate into complaints and this ensures that, wherever possible, complaints are kept to a minimum.

Since the introduction of the 2009 regulations the only mandatory timescale is that the complainant receives an acknowledgement within 3 working days. The legislation allows for a more flexible approach to the amount of time in which complaints should be dealt with. In our policy, we aim for even the most complex of complaints to be completed within 65 working days of the complaint plan being agreed. If timescales cannot be met, a new timescale should be discussed with the complainant. Locally, timescales have been introduced for amber and green complaints of 40 and 20 working days respectively.

There is a time limit of 12 months from when the matter being complained about occurred to when a complaint may be made. After this time, a complaint will not normally be considered. However, the 12 month time limit does not apply where the local authority is satisfied that the complainant had good reasons for not making the complaint within that time and where it is still possible to investigate the complaint effectively and fairly.

3.2. Children's Social Care complaints framework

The Children Act 1989 Representations Procedure (England) Regulations 2006 came into force from 1 September 2006. This procedure is for all representations received from children and young people, their parents, foster carers or other qualifying adults about social care services provided or commissioned by children's social care.

The Regulations are now fully embedded into the children's social care complaints system and information derived from complaints is included in the annual monitoring of children's social care and reported to Ofsted.

All children, young people or their families who make a representation are offered the services of an Advocate to enable their views to be effectively promoted.

There are three stages to the procedure.

» Stage 1

Local Resolution: The aim of stage 1 is to sort out the matter as quickly as possible. The complaint will be allocated to a manager who will contact the complainant to discuss the complaint. Stage 1 of the complaints procedure should be completed within 10 working days but if there are a number of issues to look into, this can be extended up to 20 working days. The complainant will receive a response to the complaint in writing.

» Stage 2

Investigation: This part of the procedure is used when the complainant remains unhappy after their complaint has been responded to at Stage 1 or the

complaint is sufficiently serious enough to warrant a more formal investigation. Investigations are conducted by an officer independent of the operational service being complained about. An Independent Person is also appointed at Stage 2. This is a statutory role and the Independent Person (who is external to the council) works alongside the Investigating Officer with a remit is to ensure that the process is open, transparent and fair.

Reports completed by the Investigating Officer and Independent Person are submitted to an Adjudicating Officer (usually Assistant Director level).

The investigation and adjudication process should be concluded within 65 working days.

» Stage 3

Complaint Review Panel: If the complainant is dissatisfied with the outcome at Stage 2, they may request that the issues are taken to a Complaint Review Panel (Stage 3). The Panel consists of an Independent Chair and two independent panel members. The Panel considers the complaint and can make recommendations to the Director of Child and Adult Services.

The Director is required to make a formal response to any findings and recommendations of the Review Panel within 15 working days of receiving the Panel's report.

3.3. Corporate complaints

Where complaints are received in to the Department that do not come under the jurisdiction of the statutory social care complaints procedures, the Corporate Complaints policy provides the framework for resolution. This includes complaints in relation to community services but also includes any complaints relating to services provided by the Department not covered in statutory processes such as: special educational needs and the integrated youth service. Complaints in relation to schools are dealt with by individual schools and their governing bodies. Local authorities have no legal obligation to investigate the substance of a complaint regarding an individual child and have no powers of direction in this regard.

Aspects of the corporate complaints procedure are currently under review to bring in line with the new democratic governance arrangements of the Council. The complaints discussed in this report relate to those received under the old system and that procedure is described below:

3.3.1. Formal complaint

Where a person remained dissatisfied with the service they had received or a decision made, they had the right to take their complaint to a formal stage. The complaint would have usually been investigated by a Senior Officer. A written response to the complaint should have been concluded within 15 working days.

3.3.2. Portfolio Holder

If a person remained dissatisfied with the response to their formal complaint, they had the right for the matter to be referred to the relevant Portfolio Holder who would have reviewed the documentation and the response to the complaint to determine whether or not an appeal should have been heard by the General Purposes (Appeals) Committee.

3.3.3. Appeal

If the Portfolio Holder agreed to an appeal, the complaint would have been heard by the General Purposes Appeals Committee which was made up of five councillors.

3.4. Referral to the Local Government Ombudsman

If, at the end of the relevant complaints procedure, the complainant remains dissatisfied with the outcome or the way in which their complaint has been handled under any of the procedures, they may ask the Local Government Ombudsman (LGO) to investigate their complaint. Complainants may also approach the LGO directly without accessing the complaints process. In those cases it is usual for the LGO to refer them back to the council for their complaint to be examined through the relevant complaints process before they intervene.

4. Principles and outcomes

Good handling of complaints and representations involves:

- Keeping the complainant at the centre of the complaints process;
- Being open and accountable;
- Responding to complainants in a way that is fair;
- Being committed to try to get things right when they go wrong;
- Seeking to continually improve services.

Statutory complaints are underpinned by the following:

- A procedure that aims to be fair, clear, robust and accessible;
- Support being available to those wishing to make a complaint;
- Timely resolution following enquiry into complaints/representations;
- Lessons learnt following complaints and services improved;
- Monitoring being used as a means of improving performance.

5. Public information

Information about the complaints and representations framework is accessible via the council's public access points and also the council's website. Carers and service users of children's and adults social care are provided with leaflets explaining the procedure when they take up a new service and when care plans are agreed and reviewed.

Information in other formats such as large print or Braille or translation in languages other than English are made available upon request.

6. Summary of representations

6.1. Adult Social Care

6.1.1. Compliments

Compliments are generally recognised to be an indicator of good outcomes for service user and carers. They also serve to provide wider lessons regarding the quality of services.

During 2012/13, 48 compliments have been received relating to Adult Social Care. Appendix 1 provides some examples of compliments received during the period.

6.1.2. Complaints received in 2012/13

A total of 14 complaints were received. One complaint received was first considered under safeguarding adults procedures but following the conclusion of those enquiries, the matter was investigated as a complaint. The number of complaints received has decreased by 3 from last year.

Of the 14 complaints investigated, 13 of these have been concluded and one remains ongoing. Details of the complaints concluded are outlined in Appendix 2.

6.1.3. Client groups

Adult Social Care			
Client group	2012/13	2011/2012	2010/2011
Older Persons	9	9	14
Learning Disabilities	0	3	1
Physical Disabilities and Sensory Loss	4	3	2
Adult Mental Health (Integrated Service)	1	2	0
HIV/Aids	0	0	0
Substance misuse	0	0	0
Carers	0	0	0
Total number of complaints received	14	17	17

The service users who were the focus of the complaints were 5 (36%) male and 9 (64%) females.

Eleven of the service users were White British, one was White Irish and the remaining 2 were Asian/British – Indian. They were aged as follows:

Age range (years)	Number of service users
18 – 25	0
26 – 35	2
36 – 45	2
46 – 55	1
56 – 65	0
66 – 75	1
76 – 85	5
86 +	3

Complaints which are considered either complex or have a number of elements are usually investigated by someone independent of the council. In 2012/13, Independent Investigating Officers were appointed to 9 of the 14 complaints investigated. The remaining 5 complaints were investigated and responded to internally.

6.1.4. Advocacy services

Of the 14 complaints investigated, none of the complainants chose to have an advocate to assist them with their complaints.

6.1.5. Timescales and the Grading of Complaints

There is no statutory timescale for investigating and responding to a complaint relating to adult social care. However, the overall aim is to respond to complaints in a timely manner. The likely timescales for investigation are discussed with the complainant at the outset of a complaint investigation and updates on progress of the investigation are provided by the Investigating Officer at regular intervals. There are a range of factors that can impact upon timescales such as:

- Whether the complaint has been considered low, moderate or high impact;
- The number of points of complaint for investigation;
- The availability of the complainant and other key people the Investigating Officer needs to interview;
- The time taken to conduct interviews with key people which can range from one person to, in one complaint, 11 interviews;
- Seeking appropriate consent for obtaining information from partner agencies and awaiting the necessary information to inform the complaint investigation;
- Reading case files and records and obtaining copies of local policies and procedures;

- Consideration all available information and the drafting of a complaint investigation report;
- Carrying out factual accuracy checks on the draft report and providing feedback to the complainant before finalising and submitting the final report.

6.1.6. Complaints carried forward to 2013/14

One of the 14 complaints received in 2012/13 has been carried forward and is being investigated in 2013/14.

6.1.7. Complaints considered by the Local Government Ombudsman in 2012/13

One complainant, whose complaints were considered by the council in 2011/12, approached the Local Government Ombudsman (LGO) on 3 separate occasions in 2011/12. In relation to 2 elements of complaint, the LGO recorded these in their statistics for the year ending 31 March 2012 as “insufficient evidence of maladministration” and with regard to the remaining element of complaint, the LGO decided it was “not in jurisdiction” to investigate. The same complainant then approached the LGO in 2012/13 with a further complaint. The LGO decided “*not to initiate an investigation*” and set out the reason why. However, the LGO have since asked the Council to respond to a particular letter sent by the complainant.

6.2. Children’s Social Care

6.2.1. Compliments

During 2012/13, 14 compliments have been received relating to Children’s Social Care. Appendix 3 provides some examples of compliments received.

6.2.2. Complaints received in 2012/13

A total of 21 complaints were received. Two complaints were withdrawn by the complainants and the Council decided not to accept a complaint where nearly 6 years had elapsed since the grounds for making the complaint arose. A total of 18 complaints were investigated. The number of complaints received has increased by 5 from 2011/12. Details of the complaints concluded are outlined in appendix 4.

- Of the 18 complaints investigated, 16 of these have been concluded and 2 remain ongoing.
- All 18 complaints investigated were responded to at Stage 1 in the first instance. Of these, 15 complaints (83%) were concluded at Stage 1.
- Of the 3 complaints (17%) that progressed to Stage 2, one of these has been resolved whilst the other 2 remain ongoing.
- There were no Stage 3 Complaint Review Panels held in 2012/13.
- Complaints were received from 4 males (19%), 16 females (76%) and 1 complaint (5%) was made jointly by a couple.

6.2.3. Advocacy services

One of the 18 complainants were assisted and supported by an Advocate during the complaints process.

6.2.4. Complaints considered by the Local Government Ombudsman in 2012/13

There were no complaints in relation to children's social care that progressed to the Local Government Ombudsman in 2012/13.

6.3. Corporate procedure

6.3.1. Compliments

During 2012/13, 14 compliments have been received relating to Community Services. Appendix 5 provides some examples of compliments received during 2012/13.

6.3.2. Complaints received in 2012/13

A total of 7 complaints were received during 2012/13 (further details are contained in appendix 6), 5 of which related to services delivered within **Community Services Division**. The remaining 2 complaints related to social care which fell outside the scope of the Statutory Complaint Procedures for social care. All complaints have been concluded and resolved.

Complaints were received from 6 females (86%) and 1 male (14%).

6.3.3. Time taken to respond to complaints

The Corporate Complaints Procedure is required to operate within a timescale of 15 working days. Of the 7 complaints, 4 (57%) were responded to within the 15 working day timescale. The remaining 3 (43%) complaints have taken longer to fully investigate and respond to the issues raised. The extra time taken in these complaints was as a result of their complexity and as well as the time taken to await a response from a provider to fully respond to all points of complaint.

6.3.4. Complaints considered by the Local Government Ombudsman in 2012/13

There were no corporate complaints that progressed to the Local Government Ombudsman in 2012/13.

7. Lessons learned

Lessons learned are an important aspect of the complaints framework. Appendix 2, 4 and 6 respectively outline the context of some improvements that have been put in place as a direct result of complaints and representations received in adult social care, children's social care and community services.

8. Conclusions and way forward

8.1. Going forward

We continue to ensure that a person-centred approach is adopted for the handling and investigation of each complaint. We will continue to focus on ensuring that we monitor that: complainants receive appropriate and timely feedback on complaints; appropriate apologies are offered; and any service improvement recommendations are delivered.

8.2. Action plan

- We will continue to promote the complaints procedure for children's social care services to a range of networks to ensure that children and young people feel confident and able to approach the department with any particular concerns.
- We will deliver complaints training to the workforce at new Hartlepool Children's Home based at 302 Stockton Road.
- We will ensure that Healthwatch are aware of the different social care complaints procedures so they are able to inform members of the public of what they can do if they are unhappy with local social care services.
- We will liaise with Independent Complaints Advocacy (ICA), the organisation commissioned by the Council to deliver an advocacy service for NHS complaints, to ensure that the service is meeting the needs of the local population.
- We will await the outcome of the NHS Complaints Review initiated in March 2013 following Robert Francis's report into failings at Mid Staffordshire NHS Foundation Trust and monitor any implications this might have on a review of statutory complaint regulations and social care complaint procedures.

Appendix 1: Examples of compliments received across Adult Social Care services

"... My reason for contacting you is to praise Social Services unreservedly for the care and support I have received from the service, especially the Reablement Workers without whom I wouldn't have made a wonderful recovery"

From a service user about the support received from the Reablement Team.

"I am writing to proffer some well-deserved praise for your Social Worker. I would like to formally place, on record, the sincere thanks of my mother, my family and myself, for the manner in which AL has dealt with the holistic health issues which have been affecting my mother in recent months."

From the son of a service user about a Social Worker.

"Your kindness to my mother-in-law was above and beyond what we could have expected. It has been a very stressful time we could not of managed all the paperwork without you."

From the daughter-in-law of a service user about a User Property and Finance Officer.

"My wife and I have been most impressed by the high professional level of care we have been given by your staff. They are truly professional in their approach to their work and it has been a pleasure having every one of them visiting our home."

From a service user about Direct Care and Support Team Workers.

"I am full of admiration and gratitude for the care I have received and value it tremendously. As you would perhaps expect my gratitude is as much for the presence of the carers as for the tasks they accomplished for me. What could have been a grim and lonely time proved to be anything but. Thank you. "

From a service user about Direct Care and Support Team Workers.

".... My wife and I would like to express our gratitude for the way her Social Worker managed her case and indeed the understanding he showed to each one of us during this trying time. In the media there are constant criticisms of social care and many social workers come under severe pressure themselves in a very testing environment. I wish to put on record that my wife and I were very impressed and wish to take the opportunity to highlight to you the professionalism, compassion and understanding he displayed on each and every occasion we met to discuss my mother's situation."

From the son of a service user about a Social Worker.

Appendix 2: Details of complaints and lessons learned in Adult Services

Details of complaint/Outcomes	Lessons learned and where appropriate, actions taken
<p>The complainant, (JC), the daughter of a service user, expressed her mother was admitted to a care home inappropriately. Further, the contract was not ended as it should have been resulting in the complainant's mother being charged for a service she didn't receive. (Partly upheld)</p> <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ OLDER PERSONS 	<p>An explanation was given to each element raised and the complainant's mother reimbursed her financial contribution of 5 days' care home fees.</p>
<p>The complainant, (DH), the son of a service user alleges that:</p> <ul style="list-style-type: none"> ▪ The User Property and Finance Officer did not carry out a financial assessment in a professional manner (Not upheld) and ▪ had an unsatisfactory attitude; (Unable to reach a finding – there was no evidence either way to support or deny the allegation) ▪ He was told his father's care fees would be free of charge up to a period of 12 weeks. (Not upheld) ▪ LOW IMPACT ▪ OLDER PERSONS 	<p>None identified.</p>

<p>The complainant, (JB), the daughter of a service user in a residential care home, alleged that:</p> <ul style="list-style-type: none"> ▪ No full explanation has been given to Mrs B and her family of how it was that her mother suffered a fall which resulted in a re-fracture of hip. (Not upheld) ▪ The attitude of the Care Home Manager after her mother's fall was unprofessional and unacceptable. (Not upheld) ▪ Despite having been reassured by the Manager of the Care Home that a full investigation would be carried out into the circumstances which resulted in her mother's fall and that they would receive a report of this investigation, to date, no information had been received by the family relating to this. (Not upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ MODERATE IMPACT ▪ OLDER PERSONS 	<p>Reflecting upon events that occurred when a large family group arrived at a time when paramedics were in attendance, it has been agreed that should a similar situation arise, one family member will be asked if they wish to remain whilst paramedics are in attendance and the remaining family members will be shown to a private room.</p> <p>Managers and Senior Care staff who have not undertaken assertiveness training as part of 'e' learning supervisory management will do so.</p>
<p>The complainant, (AB), the wife of a service user, alleged that:</p> <ul style="list-style-type: none"> ▪ Her husband did not have the mental capacity, memory ability or concentration levels to attend meetings connected with the financial assessment process and no financial reassessment took place until some 3 years later. (Not upheld) ▪ The Social Worker did not listen to or action any of her concerns around the mobility difficulties she expressed her husband was experiencing. (Unable to reach a finding - there was no evidence wither way to support or deny the allegation) <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ PHYSICAL DISABILITIES 	<p>Carried out a Carer's Assessment to ensure the complainant's needs were being met in her caring role and support provided to help her to continue to care for her husband.</p>
<p>The complainant, (AH), the wife of a service user whose husband received respite care in a residential care home, alleged that:</p> <ul style="list-style-type: none"> ▪ Her husband did not receive consistent and regular personal care during a period of respite care at the Care Home. (Partly upheld) ▪ Her husband did not receive his medication as prescribed. (Upheld) ▪ The letter to the complainant from the Care Home Acting Manager does not reflect the extent 	<p>The Care Home wrote to the complainant expressing their apologies for the disappointing service the service user and his family received and reimbursed the service user the financial contribution he paid towards the cost of his care.</p> <p>The Care Home also agreed to record greater detail of the personal care given to a resident.</p>

<p>of the failure to care nor does it contain an apology. (Upheld)</p> <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ MODERATE IMPACT ▪ OLDER PERSONS 	
<p>The complainants, (RC and JA), the son and daughter of a service user, alleged that:</p> <ul style="list-style-type: none"> ▪ The Council mis-sold them a property. (Not upheld) ▪ Their mother's care needs were not adequately assessed. (Not upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ MODERATE IMPACT ▪ OLDER PERSONS 	<p>A recommendation was forwarded to a Registered Social Landlord that they consider a review of their information about their extra-care housing provision and encourage them to include a point that social care needs assessments are required to be carried out to determine a person's eligibility to receive publicly-funded services.</p>
<p>The complainant, (PM), the son-in-law of a service user, alleges that a member of the User Property and Finance Team:</p> <ul style="list-style-type: none"> ▪ assumed a "moralistic attitude" in responding to his enquiries regarding his mother-in-law's possible entitlement to financial assistance with her care home fees. (Not upheld) ▪ "went behind their backs" and visited his mother-in-law. (Not upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ OLDER PERSONS 	<p>No recommendations were made.</p>

<p>The complainants, (JC and SR), who provided a care and support to a service user in receipt of a direct payment, alleged that:</p> <ul style="list-style-type: none"> ▪ The Council have not paid them for the additional hours they have worked on behalf of the service user. (Not upheld) ▪ They feel their professional expertise as carers had been called into question. (Not upheld) ▪ They feel that the Council have a negative view of the service they provide. (Not upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ PHYSICAL DISABILITIES 	<p>A full review of the direct payments policy, procedure and documentation was already underway but issues which emerged during this complaint investigation will be fed into the review.</p>
<p>The complainants, (B & SJ), the son and daughter-in-law of the service user in a care home, alleged that:</p> <ul style="list-style-type: none"> ▪ The complainant was made to feel inadequate as a result of the comments made by the EDT worker to whom she spoke when making the referral. The complainant made the EDT worker aware of the injury to her mother-in-law which she suggested could have been caused by force feeding and believed her mother in law had a UTI. Allegedly, the EDT worker asked “who did she think she was” to make such a statement and that only a GP could arrive at such a conclusion. The complainant alleged she was then advised if she wished she could get the Care Home to contact the Out-of-Hours GP service (Not upheld) ▪ The complainant referred her concerns to the Social Worker on the Monday morning who advised she would visit the Care Home and investigate. The complainant alleges that no one from adult social care actually visited her mother-in-law (Upheld) ▪ The Social Worker informed the complainant that the Care Home informed her of how the injury to the service user’s lip occurred. The complainant refuted the reason for the injury and alleges no further investigation into the cause of the injury occurred (Upheld) ▪ Staff at the Care Home failed to record the injury, the complainants were not advised of the injury, no safeguarding adults referral was made (Upheld) ▪ The Social Worker failed to communicate effectively with them following their contact with her on 1.4.12 (Upheld) ▪ the Care Home failed to communicate effectively with them from 1.4.12 until 22.4.12, They failed to inform the complainants of the injury and her deteriorating health whilst they were away despite leaving numbers to be contacted in the event of any concerns (Partly upheld) 	<p>Recommendations were made including:</p> <ul style="list-style-type: none"> ▪ A referral taken by EDT which refers to a possible safeguarding incident should be written on a Safeguarding Alert Form. ▪ The Care Home should review their care planning and safeguarding training. ▪ When procedures are reviewed, the relationship between Duty Team and Multi-Link workers with regard to safeguarding alerts and investigations is clarified. ▪ An apology is offered by the Care Home for the failure to maximise the service user’s independence by use of her flash cards; failing to pursue the possible cause for the injury and failing to inform the family of the injury and subsequent outcome of the GP visit. ▪ An apology is offered by adult social care for the confusion suffered by the complainants as a result of failing to follow safeguarding procedures.

<ul style="list-style-type: none"> the service user's GP was not advised of their concerns when he visited the service user on 4.4.12. (Partly upheld) the service user was not consulted regarding her lip injury. Whilst recognising the service user had lost her speech, the use of cards with pictures and words on to express her needs were not used by staff at the Care Home (Partly upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> MODERATE IMPACT OLDER PERSONS 	
<p>The complainant, (GM), the daughter of a deceased service user, alleges that:</p> <ul style="list-style-type: none"> It was not made clear to the family by social care staff about what Level 3 medication support entailed, who had responsibility for administering medication or for the safe storage of the large number of tablets her father returned home with on his discharge from hospital (Partly upheld) Social care staff were made fully aware by the family of the late service user's home circumstances and his limited family support before his discharge from hospital. The District Nurse involved in assessing the late service user after his discharge from hospital was not aware of her father's home circumstances or his limited family support (Not upheld) The Carers involved in her late father's care did not appear to be aware of his home circumstances accepting his word about taking medication, eating meals and the support he was receiving (Upheld) It was not made clear to the family by social care staff of who was undertaking the overall management and administration of the level 3 medication support following her late father's discharge from hospital (Upheld) The family were not involved in any safeguarding referral meeting that took place, nor were they asked to contribute to any reports or discussions (Not upheld) The family have not been formally informed of the outcome of the referral nor have they received minutes of any meetings or discussions (Not upheld) The family are unclear as to whether the 'unsafe discharge' comment made by staff at hospital has been fully examined (Not upheld) The family do not understand why social care staff used her late father's mental capacity as a reason to allow him to refuse hospital admission and the care and support that he needed. A formal assessment of her late father's mental capacity was not suggested to the family until after his hospitalisation following his overdose (Not upheld) 	<p>Recommendations were made including:</p> <ul style="list-style-type: none"> Apologies were expressed for those points of complaint that were either upheld or partly upheld. Informing Hartlepool Adult Safeguarding of the circumstances of the case. Reminding Social Workers of what is included within the minimum data set as well as obtaining signed agreement and acceptance of services where necessary. Reminding Home Care Supervisors that copies of any changes or additions to MAR sheets should be scanned and stored on the service user's electronic record to ensure traceability. A review of Medication Procedures.

<ul style="list-style-type: none"> ▪ The family are not aware if social care staff separately verified the accuracy of her late father's own statements about his home and personal circumstances which were then used in decisions about his care although the family did make social care staff and others aware of his actual circumstances (Not upheld) <p>Independent Investigating Officer external to the Council appointed to investigate the complaint.</p> <ul style="list-style-type: none"> ▪ MODERATE IMPACT ▪ OLDER PERSONS 	
<p>The complainant, (VG), alleged that a member of staff breached confidentiality and divulged information about her to a third party. (Unable to reach a finding - there was no evidence either way to support or deny the allegation)</p> <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ MENTAL HEALTH 	<p>None identified.</p>
<p>The complainant, (JC), a service user, alleges that:</p> <ul style="list-style-type: none"> ▪ A review of the Telecare service has not been undertaken since it was installed in 2009 (upheld). ▪ An assessment of social care needs had not been undertaken (not upheld). <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ PHYSICAL DISABILITIES 	<ul style="list-style-type: none"> ▪ Explanation provided to the service user that annual telecare reviews should have been undertaken and this situation will be addressed and a review scheduled. ▪ Explanation provided to the service user that the referral information related to an OT assessment and there was no detail to suggest a social care needs assessment was required. A referral for a social care needs assessment has now been made.
<p>The complainant, (SS), the niece of a service user, alleges that adult social care, through the actions or inactions of its staff, failed to act in the best interests of her aunt (Not upheld).</p> <p>Independent Investigating Officer external to the Council appointed to investigate the complaint. This complaint was suspended whilst the case was being considered with the safeguarding adult arena. Once the safeguarding process was concluded, the complaint was investigated.</p> <ul style="list-style-type: none"> ▪ LOW IMPACT ▪ OLDER PERSONS 	<p>The Independent Investigating Officer commended the Council for its safeguarding adult process by taking control of the situation and ensuring the necessary protection for the service user when there was doubt surrounding whether her best interest were being met.</p> <p>No recommendations were made.</p>

<p>The complainant, (AW), a proprietor of a residential care home, alleged that:</p> <ul style="list-style-type: none"> ▪ The Council misrepresented the care home on its website and public information material. ▪ Funded placements were banned from the care home and the Council has effectively placed a 6 year moratorium on the care home without a legal precedent to do so. <p>Complaint considered under Corporate Complaint Procedure.</p>	<p>Complaint: 1 element partly upheld 1 element not upheld</p> <p>Response: 18 Working days</p>	<p>Apology provided for the element of complaint that was partly upheld.</p>
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Appendix 3: Examples of compliments received across Children's Social Care services

"My husband and I would like to thank you for your reassurance that this authority (Hartlepool Borough Council) will continue to support us and N in the aim to facilitate N's return home in a safe and appropriate manner."

From the mother of a service user about Disability Services.

"Well, thank you for everything you have done in the time you looked after us, I felt you did an amazing job and you have left some "big boots" for N to fill."

From a child's grandparent to a Social Worker in Safeguarding, Assessment and Support Services.

"The older girls were initially placed with me and they advocated venomously to be all placed together. This included speaking to a wide range of professionals, it has been incredible to observe how the team have handled this and were able to facilitate their needs ..."

From a Foster Carer about social workers in Safeguarding, Assessment and Support Services.

"Our new social worker from the children's disability team has been brilliant. She has been very friendly and very understanding of J's individuality and it is very evident that she genuinely likes J and he had engaged very well with her. She had also been a good source of advice and support to me."

From the mother of a service user about Disability Services.

"The initial assessment was very thorough and L certainly went above and beyond in this piece of work. I know that L was 'just doing her job' but actually I feel she has added value to this case and that this should be recognised."

From a Family Court Advisor about a Social Worker in Safeguarding, Assessment and Support Services.

Appendix 4: Details of complaints and lessons learned in Children's Services

Details of complaint	Outcomes	Lessons learned and where appropriate, actions taken
The complainant, (EB), the mother of child who was under Police Protection, expressed her dissatisfaction in relation to the Emergency Duty Social Worker refusal for her to return to home with the child to collect some personal belongings en route to University Hospital of North Tees.	<p>Response: 10 Working days</p> <p>Resolved at Stage 1</p> <p>Note: This complaint related to the service provided by the Emergency Duty Team (EDT). As part of the arrangements in place with the EDT service, complaints at Stage 1 are looked into and responded to by the EDT service (Stockton Borough Council).</p>	Reinforce with the EDT Social Workers that the request for collection of personal items could have been relayed to the EDT and collection organised by the EDT via a taxi for example.
The complainants, (CB and MJ), the grandmother and the sister of a service user, expressed their dissatisfaction about an alleged lack of financial support as well as a decision regarding the closure of the case.	<p>Response: 26 Working days</p> <p>Resolved at Stage 1</p> <p>Note: The complainant met the Investigating Officer within 13 working days of the complaint being received and verbally resolved the complaint. The written letter outlining what was agreed was sent 13 working days after the meeting.</p>	Agreement was reached for the case to remain open and Child-in-Need support offered both financially and practically.
The complainant, (CH), the mother of a service user, was dissatisfied with attitude of a Social Worker and expressed disappointment that her Support Worker did not accompany the Social Worker on the visit.	<p>Response: 18 Working days</p> <p>Resolved at Stage 1</p>	None identified.

<p>The complainant, (KG), the mother of a service user, alleged that:</p> <ul style="list-style-type: none"> ▪ The Social Worker recorded an inaccurate description about her (Unable to reach a finding - there was no evidence wither way to support or deny the allegation). ▪ There was a lack of written documentation provided with regard to the involvement of Child & Adult Services (Upheld). ▪ The behaviour of the Social Worker was unprofessional and the process of the complaint investigation at Stage 1 had not effectively addressed this issue (Not upheld). 	<p>Response: 62 Working days</p> <p>Resolved at Stage 2</p>	<ul style="list-style-type: none"> ▪ Complainant offered the opportunity to write her own account of the incident which would be added to her son's social care record next to that of the Social Workers. ▪ Apology offered to the complainant for the lack of written documentation provided. ▪ A reminder sent to Social Workers about the need to ensure appropriate and timely written information being provided to children and their families. ▪ A reminder sent to Social Workers about the availability of training around professional skills and dealing with complex situations.
<p>The complainant, (CA), the paternal grandfather of a child, alleges that the Social Worker shared confidential information with his parents.</p>	<p>Response: 20 Working days</p> <p>Resolved at Stage 1</p>	<p>None identified.</p>
<p>The complainant, (CD), the father of an unborn baby, was dissatisfied with a delay in carrying out an assessment as well as Department's position around the mother's ability to protect her baby after its birth.</p>	<p>Response: 28 Working days</p> <p>Resolved at Stage 1</p> <p>Note: It was agreed that as it was so close to the birth of the baby, the complaint would be put on hold until after the baby was born.</p>	<p>Steps taken to ensure tighter arrangements are in place for the transfer of cases between teams.</p>

<p>The complainant, (LB), the mother of an unborn baby, was dissatisfied with a delay in carrying out an assessment as well as the Department's view on her as potential carer for her baby.</p>	<p>Response: 31 Working days</p> <p>Resolved at Stage 1</p> <p>Note: It was agreed that as it was so close to the birth of the baby, the complaint would be put on hold until after the baby was born.</p>	<p>Steps taken to ensure tighter arrangements are in place for the transfer of cases between teams.</p>
<p>The complainant, (RH), the father of a child, alleged that:</p> <ul style="list-style-type: none"> ▪ the mother dictated the supervised contact arrangements; ▪ the Social Worker took sides with the mother; ▪ the Social Worker did not visit the complainant at his home or the home of his grandparents; ▪ the Social Worker did not provide the complainant with a copy of the Section 7 Report. 	<p>Response: 19 Working days</p> <p>Resolved at Stage 1</p>	<p>Head of Service to address issue of visits to the child's home when undertaking assessments.</p>
<p>The complainant, (PH), the mother of a child, was dissatisfied with the events that took place around her son going to live with his father.</p>	<p>Response: 36 Working days</p> <p>Resolved at Stage 1</p> <p>Note: Christmas and New Year holidays impacted on the timescale.</p>	<p>None identified.</p>

<p>The complainant, (BW), the mother of a child, alleged that:</p> <ul style="list-style-type: none"> there were difficulties in accessing appropriate services for her son; her son experiencing a significant amount of difficulty whilst residing in supported accommodation; there is a lack of support one day per week for her son. 	<p>Response: 24 Working days</p> <p>Resolved at Stage 1</p> <p>Note: Christmas and New Year holidays impacted on the timescale.</p>	<p>None identified.</p>
<p>The complainant, (CC), the father of 2 children, alleged that:</p> <ul style="list-style-type: none"> the Social Worker failed to contact him in a timely way to introduce himself; the Social Worker was rude, arrogant and treated him with no respect; the Social Worker's attitude around his contact with the children was inappropriate and not within the Social Worker's remit. 	<p>Response: 10 Working days</p> <p>Resolved at Stage 1</p>	<p>Case transfer process reviewed to ensure robust arrangements are in place for introductions to family members.</p>
<p>The complainant, (LW), the mother of 2 children, alleged that:</p> <ul style="list-style-type: none"> the Social Worker wrote things in reports for Court that were incorrect. the Social Worker had said she would leave her some photographs of the children but failed to do so. 	<p>Response: 41 Working days</p> <p>Resolved at Stage 1</p> <p>Note: Annual leave arrangements as well as the complainant initially failing to engage with the complaints process delayed the investigation of the issues raised.</p>	<p>Apology provided for forgetting to leave the photographs at reception as had been arranged. The Social Worker provided the complainant with the photographs of the children at a later date.</p>

<p>The complainant, (ML), the mother of 2 children, alleged that:</p> <ul style="list-style-type: none"> the Social Worker only appeared to be interested in her husband's previous alcohol problem. the Social Worker had not read the notes taken by the previous Social Worker. the Social Worker failed to present her ID and did not leave a card with her contact details on. 	<p>Response: 17 Working days</p> <p>Resolved at Stage 1</p>	<p>None identified.</p>
<p>The complainant, (DC), the mother of 3 children, expressed her dissatisfaction around:</p> <ul style="list-style-type: none"> one of her son's not being allocated a Social Worker from the Disability Team. transport arrangements around getting 3 children to 3 different schools. the number of Social Workers allocated to the case over a short time period. core group meeting minutes allegedly going 'missing'. 	<p>Response: 18 Working days</p> <p>Resolved at Stage 1</p>	<ul style="list-style-type: none"> Liaised with the Disabilities Team Manager to discuss and clarify the process and procedure about the service the Team may provide and provided feedback to the complainant. Explanation provided with regard to the change of Social Workers allocated to the case. Explanation provided about the Core Group Minutes and that a further set would be created and distributed.

<p>The complainant, (RL), the mother of 2 children, alleged that:</p> <ul style="list-style-type: none"> the Social Worker stopped the contact with her children going ahead as a punishment towards her. the Social Worker failed to contact her to advise that a health appointment with regard to her daughter had been cancelled which left her waiting around for 40 minutes before finding out it has been cancelled. 	<p>Response: 19 Working days at Stage 1</p> <p>The complainant was dissatisfied with her response at Stage 1 and requested progression to Stage 2. After numerous attempts by both the Investigating Officer and Complaints Officer asking the complainant to get in touch about arrangements to meet, the complainant did not respond and her complaint at Stage 2 was withdrawn and the investigation abandoned.</p>	<ul style="list-style-type: none"> Explanations provided and an apology was given for any confusion caused by the arrangements.
<p>The complainant, (PH), the mother of a child, expressed her dissatisfaction that a Social Worker and Police Officer visited her home, allegedly on the insistence of her adult son, over concerns that her younger son's safety was at risk.</p>	<p>Response: 14 Working days</p> <p>Resolved at Stage 1</p>	<p>None identified.</p>
<p>The complainant, (SN), expressed that she had booked to attend courses at 2 different Children's Centres and was disappointed that one of the courses was cancelled by a member of staff who allegedly indicated that it was not permissible to attend different Children's Centres. The complainant alleges that there are no such limitations outlined in publicity material.</p> <p>Complaint considered under Corporate Complaint Procedure.</p>	<p>Complaint: Upheld</p> <p>Response: 15 Working days</p>	<ul style="list-style-type: none"> Ensured the complainant's bookings at both Children's Centres were honoured. Booking policy, procedures and marketing material to be reviewed in light of the complaint.

Appendix 5: Examples of compliments received across Community Services

"Absolutely brilliant, nothing too much trouble, excellent organisation, will definitely go back, have never been before – what a fab price for kids to explore, excellent staff, kids loved it, kids still talking about it...."

From a family group visiting Hartlepool's Maritime Experience.

"Having missed the IT revolution by a number of years I required assistance to scan and email important information to my daughter in France and tried Throston library as my first port of call. The staff could not have been more helpful As an infrequent visitor, I was struck by how relevant the library is to the local community with so much local information in a variety of media on offer Library services has never come particularly high on my list of priorities, however with staff and services like those offered to me this morning, I am beginning to see how places such as Throston are a vital hub of community activity"

From a visitor about Throston Library Service.

"... Every time I have been in the centre, it is always really busy and I put this down to all the hard work that all the staff obviously put in. To me it seems like people who visit or use the centre have a really good and fun time in a nice and friendly atmosphere. I would recommend Brierton Sports Centre to anyone. All I can say is keep up the hard and brilliant work, as it is a pleasure to visit and use the centre."

From a leisure centre user about Brierton Sports Centre.

"... may I express my thanks for a most interesting and informative day out, when we visited the Hartlepool Maritime Experience. all in all we are of the opinion that the above visit far outweighs other options/venues we have visited in the last 5 years and I look forward to returning with the younger members of the family. "

From a group visiting Hartlepool's Maritime Experience.

"My wife and I would like to take this opportunity of expressing our gratitude for the excellent service and care given by your employees at the Mill House gym. These young ladies have turned our lives around. We both feel and look better than we have for years. We are now living a more active life and feel so much younger. I am 82 years old this year and wife will be 71 years old this year and we are both looking forward to a much healthier old age, thanks mainly to your gym and your training staff. With our most sincere thanks."

From leisure centre users about Mill House Gym.

Appendix 6: Details of Community Services complaints and lessons learned

Details of complaint	Outcomes	Lessons learned and where appropriate, actions taken
The complainant, (LD), a leisure centre user, expressed her dissatisfaction with the school holiday opening arrangements at the leisure facility.	Complaint: Not upheld Response: 3 Working days	None identified.
The complainant, (AB), a leisure centre user, is dissatisfied with other users not adhering to the booking arrangements.	Complaint: Partly upheld Response: 18 Working days Note: The Investigating Officer wished to observe the practice on site for 2 consecutive weeks before concluding enquiries into the complaint.	Reminder issued to all parties about the booking arrangements and agreements in place.
The complainant, (OJ), alleged that: <ul style="list-style-type: none"> ▪ No receipt or guarantee was provided for works carried out by a contractor from an agency whose leaflet was displayed by the Council; ▪ Additional leaflets were put on display advertising the agency despite the complainant advising the Council that the agency were no longer providing the service; ▪ She was signposted to a service by the Council when there were other less costly alternatives available to her. 	Complaint: Not upheld Response: 42 Working days Note: The Council needed to obtain information from a third-party before being in a position to respond to all elements of the complaint.	None identified.

<p>The complainant, (HC), a theatre user, alleged that on a number of occasions she had been given the wrong seat/date/time for show booked and feel that staff are taking down information incorrectly which is not acceptable.</p>	<p>Complaint: Unable to reach a finding</p> <p>Response: 10 Working days</p>	<p>A courtesy call would be made to complainant (if booking made at least 2 weeks prior to the show) to ensure all booking details were correct. This would be monitored over a for a 6 month period.</p>
<p>The complainant, (HC), a theatre user, alleged that she booked for a 1.30 pm performance and when she arrived she found other people in the allocated seats. Upon checking, she was advised that she had booked for the 3.30 pm performance (which she disputes) and expressed her disappointment at the different seats she was shown to for the 1.30 performance.</p>	<p>Complaint: Unable to reach a finding - there was no evidence either way to support or deny the allegation.</p> <p>Response: 2 Working days</p>	<p>As a gesture of goodwill, the complainant was provided with tickets to attend another show of her choice within a set time period.</p>

ADULT SERVICES COMMITTEE

4 November 2013



Report of: Assistant Director, Adult Services

Subject: S136 MENTAL HEALTH ACT (MHA) 1983/2007
PLACE OF SAFETY

1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required, for information only.

2. PURPOSE OF REPORT

- 2.1 To inform the Adult Services Committee of a decision made by Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) to close the Sandwell Park Place of Safety (PoS) in Hartlepool for a six month pilot.

3. BACKGROUND

- 3.1 Section 136 of the MHA relates to mentally disordered people found in public places. This section “allows for the removal to a Place of Safety of any person found in a place to which the public have access (by payment or otherwise) who appears to a police officer to be suffering from mental disorder and to be in immediate need of care or control. Removal to a place of safety may take place if the police officer believes it necessary in the interests of the person or for the protection of others” (Code of Practice, MHA).
- 3.2 The purpose of removing a person to a place of safety in these circumstances is to enable the person to be examined by a doctor and interviewed by an Approved Mental Health Professional (AMHP) so that the necessary arrangements can be made for the person’s care and treatment. The maximum period a person may be detained under S136 is 72 hours.

4. CURRENT POSITION

- 4.1 In the last 12 months (August 2012 – August 2013) the statistics for people on a S136 in Hartlepool are:

- From 9.00-5.00 Monday to Friday, 10 people were placed on S136. Of these, 3 people were subsequently admitted to hospital and 7 people were discharged back into the community.
 - During out of hours and weekends, 18 people were placed on a S136. Of these, 7 people were subsequently admitted to hospital and 11 people were discharged back into the community.
- 4.2 The Royal College of Psychiatrists published Standards on the use of Section 136 of the MHA 1983 in July 2011 and Guidance for Commissioners on service provision for S136 in April 2013 (www.rcpsych.ac.uk). Defined standards for the physical layout should be applied to a PoS in mental health units.
- 4.3 The current Place of Safety at Sandwell Park in Hartlepool does not meet the required standards as laid down by the Royal College of Psychiatrists for the following reasons:
- It is not a separate facility that is locked;
 - It comprises one room only;
 - It is not spacious/airy;
 - There is no opportunity for the person on a S136 to lie down and rest/sleep;
 - It does not have its own specific means of access/exit;
 - The S136 room in Sandwell Park is based in the central area of the building and, as a result, the dignity/privacy of people is compromised because visitors to Sandwell Park have to walk through the S136 environment.
- 4.4 The S136 Place of Safety at Roseberry Park in Middlesbrough meets the required standards because:
- It is secure and has a separate means of access/exit which can be used discreetly and speedily;
 - It has a suite (rather than a room) which comprises a staff office with internet access and 2 assessment rooms. One of these rooms contains basic bedding and toilet facilities;
 - It is a large, spacious/airy environment which is attached to the psychiatric intensive care facilities and acute admission wards;
 - It is on the same site as James Cook Hospital which allows any necessary transfers to be effected in a timely way. This also ensures that services for treatment of any patient who is deteriorating physically/requiring emergency care are readily available.
- 4.5 Patients admitted to Roseberry Park Place of Safety under a S136 MHA, who are subsequently discharged, are sent home via a taxi service commissioned by TEWV.

5. PROPOSALS

- 5.1 TEWV will close the Sandwell Park Place of Safety in Hartlepool for a trial period of six months from 1 October 2013. From this date all people detained on a S136 will be taken to Roseberry Park Hospital Place of Safety for assessment.
- 5.2 TEWV propose that this change to the venue for assessment of people from Hartlepool detained on a S136 will provide a better experience for patients due to the purpose-built facilities at Roseberry Park and the fact that the Crisis Resolution Home Treatment Team (CRHT) is based on site.
- 5.3 The facility at Roseberry Park offers accommodation that complies with the Royal College of Psychiatrists' Guidance and which will provide a safer and better experience for people detained under S136. The Place of Safety at Sandwell Park is no longer fit for purpose and there is no space on site to make any physical improvements that would address the issues identified.
- 5.4 The location of a Place of Safety at Roseberry Park allows timely access to other facilities as required i.e. CRHT team and acute hospital wards.
- 5.5 TEWV facilitate and fund the taxi to return a person to Hartlepool if they are discharged from S136 back into the community.
- 5.6 This proposal may impact on the local authority's Approved Mental Health Professional Social Workers who will have to travel to Middlesbrough to complete assessments under S136 of the MHA. The trial period of 6 months will enable the council to monitor any adverse impact on the capacity of the social workers and address these issues as part of the evaluation process.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Adult Services Committee notes TEWV's intention to trial a change of venue for their Place of Safety for Hartlepool residents from Sandwell Park to Roseberry Park at Middlesbrough.
- 6.2 A further report will be brought to the Committee in May 2014 to evaluate the impact of the change of venue and to consider any positive or adverse impacts that it may have on our AMHP workforce.

7. REASONS FOR RECOMMENDATIONS

- 7.1 The AMHP workforce are part of the integrated mental health services in Hartlepool and play a key role in S136 assessments. The change of venue may impact on this role in terms of traveling time to Middlesbrough and reduced capacity as a result.

- 7.2 It is acknowledged however that the PoS will provide a much safer and better physical environment as well as access to other resources that may be required for people detained on a S136.
- 7.3 The six month trial of the move to Roseberry Park will be monitored and evaluated with a further report to be brought to the committee at the end of this process.

8. CONTACT OFFICER

Geraldine Martin
Head of Service, Adult Social Care
Child & Adult Services
geraldine.martin@hartlepool.gov.uk
Telephone: 01429 523880

ADULT SERVICES COMMITTEE

4 November 2013



Report of: Assistant Director, Adult Social Care

Subject: TEES PLACE OF SAFETY SCHEME

1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required, for information.

2. PURPOSE OF REPORT

- 2.1 The purpose of the report is to provide the Adult Services Committee with information on the current arrangements for a Tees Place of Safety Scheme.

3. BACKGROUND

- 3.1 The Council is committed to encouraging access to facilities in the town via a range of transport options and the Council's Integrated Transport Unit, in partnership with Child and Adult Services, developed a Hartlepool Community Travel Support Network
- 3.2 The Council also introduced an Independent Travel Training scheme (Safe on the Move in Hartlepool) which encouraged young people and adults to access Hartlepool facilities using different modes of transport. As part of the roll out of the scheme anyone who felt they required support to travel independently was encouraged to sign up to assist in their safe travel around Hartlepool
- 3.3 As the scheme developed the remit expanded to include engaging employers and businesses to sign up and offer assistance to people in areas such as support to read a bus timetable, directing people to bus stops or helping to make a call to a parent or carer.
- 3.4 The network now has a number of volunteers and volunteer organisations trained to assist people to travel safely and independently (see **Appendix 1**).

- 3.5 In addition to the Safe on the Move in Hartlepool scheme, the Council in partnership with Cleveland Police and the National Autistic Society (NAS), supported the roll out of the NAS Autism Alert Card in 2009.
- 3.6 The Autism Alert Card can be held by people with a diagnosis of autism and presented to the police in the event they are approached in public. The card was launched locally in 2009 and linked to autism awareness training for the police (see **Appendix 2**).
- 3.7 In the summer of 2013 a grant of £2,000 was received by the four Tees Local Authorities (Hartlepool, Stockton, Middlesbrough and Redcar and Cleveland) from the Tees Safeguarding Vulnerable Adults Board to support the development of a Tees Place of Safety scheme and build on the work already done within Hartlepool.
- 3.8 Inclusion North (a user led organisation) has facilitated the development of a Tees scheme which has the support of the Police and Crime Commissioner and Cleveland Fire Brigade.

4. PROPOSALS

- 4.1 It is proposed that the existing Safe on the Move in Hartlepool scheme is re-branded and, along with other similar schemes across Tees, carries the new Tees Place of Safety Logo (see **Appendix 3**).
- 4.2 Inclusion North and key stakeholders of the Tees Safeguarding Vulnerable Adults Board have agreed to promote the scheme within their local areas, ensuring a consistent approach across Tees.

5. RISK IMPLICATIONS

- 5.1 The scheme will provide somewhere safe and friendly should people become lost, feel vulnerable or require assistance to support their independence.
- 5.2 The scheme is not aimed at replacing or providing a place of safety under Section 136 of the Mental Health Act 1983/2007.

6. FINANCIAL CONSIDERATIONS

- 6.1 Funding to re-brand the scheme has been provided by the Tees Safeguarding Vulnerable Adults Board.
- 6.2 No further additional resource requirements have been identified as yet.

7. EQUALITY AND EQUALITY CONSIDERATIONS

- 7.1 The scheme will support a number of people with protected characteristics and supports the ethos of the Equality Act, the positive attributes of effective compliance with the Equality Act, and best practice in workplace diversity.

8. RECOMMENDATIONS

- 8.1 It is recommended that the Adult Services Committee note this information and the plans in place to further enhance the Safe on the Move in Hartlepool Scheme.

9. REASONS FOR RECOMMENDATIONS

- 9.1 The proposed developments will raise awareness of autism and provide support for people with autism in Hartlepool.
- 9.2 The progress made to date demonstrates joint working and a commitment to making the best use of resources to deliver shared outcomes.

10. BACKGROUND PAPERS

<http://www.hartlepoolnow.co.uk/595/longterm-conditions/autism-alert-card.html>

11. CONTACT OFFICER

Neil Harrison
Head of Service, Adult Services
Hartlepool Borough Council
E-mail: Neil.harrison_1@hartlepool.gov.uk
Tel: 01429 284371

Appendix 1

Community Travel Support Network



Supported by Aiming High for Disabled Children



How do I sign up for the scheme?

The scheme is open to all residents and is free of charge, all you have to do is register by contacting:

Kevin Hall
Transport Officer
Integrated Transport Unit

Tel: 01429 523695
Email: kevin.hall@hartlepool.gov.uk

This document is also available in other languages, large print and audio format, upon request. Contact us on 01429 523695.

এই ডকুমেন্ট অন্য ভাষায়, বড় প্রিন্ট আকারে এবং অডিও টেপ আকারেও অনুরোধে পাওয়া যায়।
本文件也可應要求，製作成其他語文或特大字體版本，也可製作成錄音帶。
अनुरोध पर यह दस्तावेज अन्य भाषाओं में, बड़े अक्षरों की छपाई और सुनने वाले माध्यम पर भी उपलब्ध है।

ہم ہنگامہ ضرورتاً یہ زمانہ گاہی کہ، بہ چاہیے۔ درشت و بہ شریعتی تصدیق دوس دھکویت

هذه الوثيقة متاحة أيضا بلغات أخرى والأحرف المتباينة الكبيرة وبطريقة سمعية عند الطلب.

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku lub w formie audio.

درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی پیش ہے۔



Appendix 1

Hartlepool Community Travel Support Network

Hartlepool Council is committed to encouraging access to facilities in the town via all transport options, with particular attention being paid to vulnerable members of society.

The Council has introduced an Independent Travel Training scheme which encourages young people and vulnerable adults to access all of Hartlepool's facilities using different modes of transport.

As part of our roll-out we are encouraging any person who feels they may require support during their journey to sign up to the scheme to assist in their safe travel around Hartlepool.

From time-to-time those accessing the programme may require some additional support while undertaking their journey. The best place to offer support would be from staff at the facilities accessed by users on the programme. This support could be as simple as assisting the person in reading a bus timetable, or directing them to a bus stop or help in making a call to a parent or carer.

By contacting the scheme coordinator you will receive a joining pack and details of the businesses offering help and advice as part of the scheme. See contact details on reverse

What is the Community Travel Support Network?

The Community Travel Support Network is a system of volunteers and volunteer organisations in Hartlepool trained to assist our clients in traveling around Hartlepool independently and safely.



The Community Travel Support Network provides

- Somewhere safe and friendly
- Staff to understand and give reassurance
- Staff to listen and provide help and advice
- Make a phone call
- Information (bus timetables, bus numbers, directions or any information required by the individuals)



Business Involvement

Businesses support through the following:

- Helping those that need help
- Provide support for access to transport
- Contact parent/carer if needed



Who else is involved?

- Parents and carers
- Friends and family
- Peer mentoring
- School and College staff
- Social Workers and Key Workers
- Outreach buddies
- Work Experience/Employment Links
- Transition Officers





Stockton-on-Tees
BOROUGH COUNCIL

Middlesbrough
moving forward



Safe Place Scheme in Tees

The BIG Launch day



What's it all about?

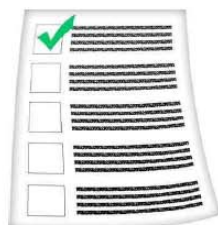
A Safe Place Scheme is being launched in Tees. Safe Places are venues in the community where people with learning disabilities can go if they are feeling unsafe or want some help and support.

Most schemes are aimed at people with learning disabilities but other people might use them too such as older people or people with autism. It depends on what is decided where you live and work. Safe Places can be in lots of different venues such as shops, cafes or libraries.



Safe places are a chance for people and organisations to make sure that their community is a safe and welcoming place for all. The Police and Fire brigade are supporting this.

What will happen on the day



The day will be a chance to:

- Find out what Safe Place are and stories from other places
- Find out how the scheme will work across Tees

- Think about what you or your organisation or business might do to support the scheme



Who should come along

The launch is for people who live or work in Tees. People who we want to come along:

- People who want to use the scheme and their families
- People who work for services
- People who run organisations and businesses who might want to be part of the scheme



When and where will it be?

The Launch will be held in Stockton on the 17th of October starting at 10.00am and finishing at 12.00pm.

Once you have booked your place you will receive joining instructions including where the event will be.

Want to book a place?

Places are limited so you will need to book a place. Please contact Paul Green on

Phone: 01642 528458

Email: Paul.Green@stockton.gov.uk



We look forward to hearing you

Appendix 2



Appendix 3



Adult Services Committee

4 NOVEMBER 2013



Report of: Assistant Director – Adult Services

Subject: SAVINGS PROGRAMME 2014/15 –
ADULT SERVICES

1. TYPE OF DECISION

- 1.1 For information. It is recommended that Members of the Committee note the content of this report and formulate a response to be presented to Finance and Policy committee on 29 November 2013.

2. PURPOSE OF REPORT

- 2.1 The purpose of this report is to identify proposals for the delivery of savings in adult services for consideration as part of the 2014/15 budget process.

3. BACKGROUND INFORMATION

- 3.1 As part of the 2014/15 Savings Programme, a number of service areas were identified where potential savings could be made. As part of the process for the budget for 2014/15 it has been agreed that individual Policy Committees will consider these savings proposals prior to consideration by Finance and Policy Committee and then Council.
- 3.2 The proposals in the report identify the savings to be made, the risks associated with these and the considerations which have been taken into account in developing them including consideration of key elements which together comprise Social Return on Investment (SROI).
- 3.3 Scope
The areas of expenditure that are under consideration within this review are as follows:

Assessment & Care Management

- Social Work Teams
- Adult Safeguarding

- Occupational Therapy Team

Residential Placements

Personal Budgets

- Home Care
- Equipment
- Day Services
- Supported Accommodation
- Direct Payments (allocations to people to use as they wish to meet their care and support needs)

3.4 Aims

The focus of adult services is to support people to remain independent and to exercise choice and control regarding how their support needs are met. Some services are provided by the department (including assessment and care management and disability day services) and others are commissioned for people (such as residential placements and day services for older people).

3.5 Service Users

People who use adult social care services in Hartlepool are over 18 and assessed against the Fair Access to Care Services (FACS) criteria as having a substantial or critical level of need. Services support older people, people with learning disabilities, sensory loss or a physical disability, people with mental health needs, people who have alcohol dependency or substance misuse issues and carers.

3.6 Engagement

The department engages with people who use services through a range of methods including:

- Carers Strategy Group
- Learning Disability Partnership Board
- Mental Health Forum
- Champions of Older Lifestyles Group
- Service User Focus Groups; and
- Family Leadership Courses.

Feedback is also obtained through the annual Adult Social Care User Survey, a national Carer's Survey, Service User Experience Sampling and through complaints and compliments.

The first Local Account for adult social care was published in December 2012 and tells residents about:

- how well adult social care in Hartlepool has performed
- the challenges faced; and
- plans for future improvements

It is a requirement that a Local Account is produced annually and the Local Account for 2012/13 will be published in December 2013, informed by feedback received over the last year.

3.7 Inputs / Expenditure

The total expenditure on adult social care is £44.5m, with £14.1m income, £7.3m from people's personal contributions and a further £6.8m from other income (primarily NHS funding).

The breakdown of how the £44.5m is spent is as follows:

Area of Expenditure	Spend
Assessment & Care Management	£6.5m
Residential Placements	£18m
Personal Budgets	£17.5m
Housing Related Support	£2.5m

The breakdown of spend on personal budgets is as follows:

Area of Expenditure	Spend
Home Care	£6m
Direct Payments	£4.9m
Supported Accommodation (including Extra care)	£3.1
Day Services	£1.8m
Equipment	£0.9m
Other	£0.8m

3.8 Outputs / Outcomes

The Care Quality Commission no longer assess or rate adult services but the last two assessments that were undertaken rated Hartlepool's services as excellent – the best rating that could be achieved. Since the last assessment, services have continued to perform well and most performance indicators for adult services have been achieved or exceeded.

Some of the outputs achieved are as follows:

- Over 5,700 people receive support from adult social care services.
- Over 2,000 carers had an assessment during the last year and received support to maintain their caring role.
- The number of people using telecare continues to grow with over 1,250 people currently being supported.
- People received over 5,200 pieces of equipment to help them stay at home and over 95% of people received equipment within 7 working days.

Some areas where positive outcomes have been achieved include:

- Over 95% of people who have ongoing needs and are eligible to receive a personal budget have their support provided through a personal budget and exercise choice and control over how their support needs are met.
- Over 13% of adults with a learning disability and adults receiving mental health services are in paid employment.
- 76.3% of service users surveyed reporting that they are satisfied with adult services (the third highest satisfaction rating in the country).

- 81.3% of people who use services and carers who were surveyed reporting that they find it easy to access information about services.
- 92.1% of carers surveyed reporting that they have been included or consulted in discussions about the person they care for.

3.9 Savings Target

The savings target for adult services for 2014/15 is £1,325,000.

4. PROPOSALS

4.1 Carers Services

A range of services are commissioned and provided to support carers. These include:

- Information, advice and support commissioned from Hartlepool Carers;
- A carers' card scheme where carers are able to claim discounts on purchases and services for carers;
- Carers awareness training for professionals;
- Support for carers of people with dementia ;
- Direct payments for carers;
- The Carers Emergency Respite Care Scheme (CERCS); and
- Respite services that give carers a break from their caring role

The cost of carers services is approximately £670,000 (excluding respite provision and sitting services for older people) with £190,000 of this funding currently coming from the Funding Transfer from NHS England to Social Care – 2013/14.

In recent years additional funding has been allocated to the NHS to provide support for carers, with a focus on supporting carers to access short breaks. Funding of just over £600,000 has been identified by the NHS to support services for carers in Hartlepool over the coming three years. This funding enables a saving of £200,000 to be achieved from April 2014 with no impact on services for the next three years.

4.2 Review of Contribution Policy

The proposed changes to the Contribution Policy were reported to the Adult Services Committee on 7 October 2013. A period of consultation is currently underway, ending on 26 November 2013, and a decision regarding implementation of any changes will be made by the Adult Services Committee on 6 January 2014, for implementation from 1 April 2014.

The proposal to increase the maximum amount that people can contribute to the cost of their care from 75% to either 95% or 100% will generate additional income for adult services of between £158,000 and £218,000. For the purposes of the savings proposals, the middle ground figure of £188,000 has been used.

If the proposed change is implemented, between 380 and 430 people will be required to contribute more towards the cost of their care. The majority of the people affected (over 90%) would be older people.

4.3 Day Services for Older People

There are two commissioned services which provide building based day opportunities for older people – a day centre at Hartfields and a service specifically for people with dementia at Gretton Court (which is jointly funded by the Clinical Commissioning Group).

Both contracts end in March 2014 so there is a requirement for the services to be tendered and both services have been reviewed in the past year.

The day centre for older people at Hartfields has a lower uptake of places than was anticipated when the service was originally commissioned, largely due to people using direct payments to access support and social activities in different ways. The day centre at Gretton Court is also currently under utilised, although to a lesser degree.

It is proposed that a single tender is issued that will support older people to access community activities (including building based day services where appropriate) but moves towards a model that will:

- facilitate meaningful and individualised day opportunities for people
- enable people to develop and sustain sources of community support through engagement in activities and opportunities within the local community e.g. libraries, community centres, neighbourhood offices, health and well-being centres etc)
- provide support and information about health promotion, prevention of ill health, general health and well-being and facilitate activities for physical exercise.
- provide a pathway of support for people with a dementia from early on set through to advanced end stage dementia.

Through re-tendering the current services, it is anticipated that a saving of £100,000 will be achieved with minimal impact on people currently accessing services and building based services maintained for those who need this level of support.

4.4 Low Level Services

The current contract for low level services was awarded to Hartlepool Voluntary Development Agency (HVDA) from 1 October 2013 and ends in March 2014.

Current funding for the service (£340,000 p.a.) is made up of four elements:

- £50,000 – CCG investment in the original connected care pilot
- £50,000 – HBC investment in the original connected care pilot
- £120,000 – Funding Transfer from NHS England to Social Care
- £120,000 – CCG reablement funding

The original connected care pilot will not be funded from April 2014, which will achieve a saving of £50,000 for the Council and £50,000 for the CCG.

By merging the remaining funding for this service with the current funding for day services for older people (see 3.3), and creating a single tender for Low Level Support and Community Activities a further saving of £100,000 can be achieved.

4.5 Housing Related Support

Housing related support was been funded for a number of years through the Supporting People Grant, which initially was ring-fenced but is now allocated through base budget funding with significant cuts applied in 2011/12 and 2012/13:

2010/11 Funding	-	£3,985,000	
2011/12 Funding	-	£3,443,000	(cut of £542,000 / 13.5%)
2012/13 Funding	-	£3,218,000	(cut of £226,000 / 6.6%)

A review of all housing related support services was undertaken in 2011 which identified savings of £1,043,000 – an amount which enabled the cuts to be managed and also identified savings in excess of the cuts, which contributed £275,000 towards the 2012/13 savings target for adult services.

Extra care housing was excluded from the initial review as the services were still relatively new, and further work was needed to identify whether savings could be achieved. A review of funding for extra care housing has now been undertaken and a saving of £165,000 identified for 2014/15. The saving will be achieved through a £75,000 reduction in funding for Joseph Rowntree Housing Trust, who provide extra care at Hartfields and a £90,000 reduction in funding for Housing Hartlepool, who provide extra care at Laurel Gardens, Bamburgh Court, Albany Court and Richard Court.

The £75,000 saving from the Joseph Rowntree Housing Trust contract for Hartfields will be achieved through implementation of a policy that enables payments to be suspended when residents are admitted to hospital for more than two weeks, no inflationary uplift being applied to the contract value for 2014/15 and a review of working arrangements to improve efficiency and effectiveness.

The £90,000 saving from contracts with Housing Hartlepool will be achieved through reconfiguration of services, reductions in management costs and reviews of staffing arrangements.

4.6 Occupational Therapy Service

A review has been undertaken of all spend within the Occupational Therapy Service and a number of areas have been identified where savings can be achieved.

Non pay savings of £78,000 can be achieved as follows:

- £8,500 from non pay staffing budgets including vehicle / mileage costs and a saving achieved from the stair lift contract.
- £10,000 from disabled adaptations budget.

- £12,500 reduction in overhead costs for the Tees Community Equipment Service (TCES) contract.
- £10,000 reduction in the direct payment budget, which is not required as people generally use TCES to access equipment rather than taking a direct payment.
- £37,000 which has historically been under spent and then capitalised to support larger adaptations.

The implications of these savings will be that there is less flexibility within the Occupational Therapy budget to manage variation in costs for disabled adaptations, and variation in costs for the TCES contract (as spend varies based on activity). There will also be a reduction in capital funding from this budget to support major adaptations, but this shortfall can be addressed through use of the annual capital grant that is received for adult services.

Pay savings of £30,000 will be achieved through a restructure of the reablement team. The service currently has six Reablement Assessors employed at band 8 and one Social Care Officer employed at Band 9. As the service has developed, it has become apparent that the differential in roles is not required, and it is proposed to restructure the team, deleting the Band 9 Social Care Officer post. There has been an expression of interest in voluntary redundancy from within the reablement assessor staff team, so it is anticipated that the current post holder can be redeployed.

4.7 Review of Management Structures

Management structures are reviewed on an ongoing basis and a number of opportunities to achieve savings have arisen within adult services, as follows:

- Deletion of a Band 14 Social Care Transformation Manager post. This post is currently vacant following the post holder being appointed to the new Principal Social Worker role working across children's services and adult services. This will achieve a saving of £53,000.
- Deletion of Band 14 Occupational Therapy Manager post. The current post holder plans to take Early Retirement / Voluntary Redundancy in April 2014 and the post will not be filled. Responsibility for managing occupational therapy services will transfer to the two Locality Care Management Team Managers, with appropriate arrangements in place for professional supervision of staff to be maintained. This will achieve a saving of £53,000.
- Deletion of a Band 11 Safeguarding Support Officer post which works across children's and adults services. The future role of the Safeguarding Adults Boards is under review and it is anticipated that there will be a statutory Teeswide Safeguarding Vulnerable Adults Board in the future, supported by all strategic partners. This will achieve a saving of £20,000 for adult services, with a saving also achieved for children's services.
- Reduction in hours for a Band 11 Commissioning Officer post, where a member of staff has reduced hours to half time following maternity leave, which will achieve a saving of £18,000.

- Removal of a budget of £27,000 that relates to a historic arrangement where adult services contributed to the management costs of the Drug Action Team. This contribution has not been required in recent years and drug and alcohol services are now fully resourced from the Public Health budget.

Achieving further savings through management costs will result in increased workloads, reduced capacity for remaining managers, further broadening of spans of control and potentially an increased risk of harm to vulnerable adults and the Council's reputation as a result.

4.8 Disability, Sensory Loss & Provider Services

A range of services that support adults with disabilities and sensory loss have been reviewed and potential savings identified as follows:

- Funding reduced capacity in the Employment Link Service, with adult services funding two posts rather than the current three posts. This would achieve a saving of £25,000. This service is currently based within Economic Development, and it is possible that funding may be available through grant funding to maintain the third post. If this is not possible, a Band 8 post would be deleted and the service for adults with mental health needs and / or learning disabilities would continue with reduced capacity.
- A saving of £20,000 will be achieved through a review of all advocacy services, and a move to a single Teeswide Advocacy Service which will include Independent Mental Health Advocacy (IMHA), Independent Mental Capacity Advocacy (IMCA) and generic advocacy services for vulnerable adults. This work is being led on behalf of the four Tees Local Authorities by Redcar & Cleveland Borough Council with a new contract expected to be awarded early in 2014/15.
- A saving of £42,000 from a supported living contract for adults with learning disabilities. This will be achieved due to a clause in the original contract that delivered a financial benefit to the local authority when staff that were transferred to the scheme from the NHS under TUPE arrangements retired or moved on and were replaced with staff employed on the provider's standard terms and conditions. From April 2014 three part time staff will have retired from the service and been replaced generating the £42,000 reduction in the contract value for the Council.
- Within the Direct Care & Support Service there are a number of un-worked hours / vacant posts which have been held to manage peaks in demand. The saving that can be identified in this area is £56,000.

4.9 Mental Health Day Services

The current day opportunities service for adults with mental health needs is provided by Creative Support and the contract ends in September 2014. It is proposed that the service is not re-commissioned following the contract end date. The service was commissioned for a three year period with reducing funding over the three years in recognition of the fact that the ethos of the service was to support people to access existing resources within their communities. Anyone with a mental health need, who meets the Council's eligibility criteria and has ongoing support via a personal budget, who wishes

to continue using services provided by Creative Support will have the option to do so using their personal budget. This will achieve a part year saving of £50,000 in 2014/15 with a full year saving of £100,000.

4.10 Workforce Development

The current adult services budget for workforce development is £150,000. It is proposed that this is reduced by £50,000 as part of the savings proposals for 2014/15.

The impact of this saving will be that adult services training will focus solely on statutory and essential training requirements. This will mean a greater focus on Best Interest Assessor and adult safeguarding training and the core training required for direct care and support staff (including moving and handling and management of medicines).

Each team manager has been asked to identify the essential core training requirement for their staff. Any requests for training that are not considered essential will not be supported unless there are under-spends in the workforce development budget, or within team staffing budgets.

5. OPTIONS ANALYSIS

5.1 A range of options to achieve the required savings have been explored across adult services and been discounted, primarily due to the level of risk involved. These include:

- Reducing capacity in social work teams – considered too high risk due to impact on waiting times, performance indicators and caseloads.
- Reducing spend on residential placements – not possible in light of the fair cost of care and increased pressures on residential provision.
- Reducing spend on personal budgets – this is not possible without a fundamental review of the Council's approach to personalisation and the Resource Allocation System. People who already have services could not have their resource reduced without evidence of a change in their assessed level of need. This issue may be revisited when considering savings for 2015/16.
- Increasing income from the NHS – this is a very volatile area and funding secured is often allocated on a short term basis, which does not address the requirement for ongoing cuts from the general fund budget.

6 RISK IMPLICATIONS

6.1 There are a number of risks implicit in the delivery of any package of savings and it is important to recognise these as part of any decision making. A summary of the risks considered as part of the proposals has been identified below:

- Reduced flexibility within provider services to manage peaks in demand, which are usually associated with severe winters or pressures within NHS services. This may result in delayed transfers of care from hospital

which are attributable to adult social care if cases cannot be dealt with as quickly as they have been previously.

- Reduced flexibility to manage demand for equipment services, which may result in increased waiting times and financial pressure in future years.
- Increased spend on personal budgets due to proposed changes to day service provision for adults with mental health needs and older people.
- Reduced capacity to effectively manage adult services and participate in local and regional developments.

7. FINANCIAL CONSIDERATIONS

7.1 It has been highlighted in previous reports that failure to take savings identified as part of the 2014/15 savings programme will result in the need to make alternative unplanned cuts and redundancies elsewhere in the Authority to balance next year's budget.

7.2 The proposals outlined will deliver the following savings:-

Service	Proposed Savings
Carers Services	£200,000
Review of Contributions Policy	£188,000
Day Services for Older People	£100,000
Low Level Services	£150,000
Housing Related Support Services	£165,000
Occupational Therapy Service	£108,000
Review of Management Structures	£171,000
Disability Services & Provider Services	£143,000
Mental Health Day Services	£50,000*
Workforce Development	£50,000
Total Proposed Savings	£1,325,000

* Full year saving of £100,000 will be achieved in 2015/16

7.3 The proposals involve a number of posts being deleted, which will result in redundancy costs. The exact costs can't be determined until redeployment opportunities are fully explored and the relevant redundancy selection processes are undertaken.

8. EQUALITY AND DIVERSITY CONSIDERATIONS

8.1 An Equality Impact Assessment has been undertaken and is attached at **Appendix A**.

8.2 By definition, all of the savings proposals in adult services will affect the people who access adult services – those who are over eighteen and assessed against the Fair Access to Care Services (FACS) criteria as having

a substantial or critical level of need (older people, people with learning disabilities, sensory loss or a physical disability, people with mental health needs, people who have alcohol dependency or substance misuse issues and carers).

9. STAFF CONSIDERATIONS

- 9.1 Informal consultation with Trade Unions regarding the staffing implications of the savings proposals has been undertaken. Staff affected by the proposals have been informally notified and formal consultation will be undertaken (in line with agreed HR policies and procedures) if the proposals are accepted.
- 9.2 It is anticipated that a total of five posts will be deleted linked to the adult services saving proposals. Of these five posts, one is currently vacant leaving four people at risk of redundancy. There has been one expression of interest in voluntary redundancy and one potential bumped redundancy identified leaving two people at risk of compulsory redundancy if voluntary redundancy applications are approved and the remaining staff are not successfully redeployed.

10. RECOMMENDATIONS

- 10.1 It is recommended that Members of the Committee note the content of this report and formulate a response to be presented to Finance and Policy Committee on 29 November 2013.

11. CONTACT OFFICER

Jill Harrison
Assistant Director – Adult Services
Hartlepool Borough Council
Tel: 01429 523911
Email: jill.harrison@hartlepool.gov.uk

Department	Division	Section	Owner/Officer
Child & Adult Services	Adult Services		Jill Harrison, Assistant Director – Adult Social Care
<u>Function/Service</u>	Adult Social Care Services <ul style="list-style-type: none"> • Contribution Policy for Non-Residential Care – subject of a separate impact assessment. • Day Opportunities for Older People • Low Level Services • Services that support Carers • Housing Related Support Services • Occupational Therapy Service • Review of Management Structures • Disability Services and Provider Services • Mental Health Day Services • Workforce Development 		
<u>Information Available</u>	<p>Savings proposals have been identified following careful consideration of budgets, spend in service areas over the past three years and existing structures.</p> <p><i>Day opportunities for older people and low level services</i> – the proposal to create a single tender for low level services and day opportunities for older people will ensure that people will be able to access services/support that meet their individualised needs.</p> <p>People who are eligible to receive support from the department will continue to do so through the provision of personal budgets and direct payments.</p> <p>The impact on service users will be monitored as part of the new contract arrangements that are put in place.</p> <p>The proposal to reduce HBC funding for <i>carers services</i> will be mitigated by funding allocated by the NHS to provide support for carers in Hartlepool. There will be no impact on carers who receive services in Hartlepool.</p> <p><i>Housing related support</i> – the proposed reduction in funding to providers would have no impact on front line service delivery as the reduction would be in management costs and more efficient service delivery models.</p> <p><i>Occupational Therapy Services</i> – whilst it is not anticipated that the proposed reduction in funding will have an impact on service users, there will be less flexibility for services to respond to any increased demand.</p> <p><i>Review of management structures</i> – there is no direct impact on service users expected because of reductions in management. However, there may be an indirect impact as the workloads for remaining managers increase.</p>		

	<p><i>Disability services and provider services</i> – the majority of savings identified in disability and provider services will not have an impact on the people who use services. The one potential exception is the reduction in posts funded in the Employment Link Service. Whilst every effort will be made to secure alternative funding, if the post is removed, the amount of support available to people accessing the service with mental health needs and/or learning disabilities would be reduced.</p> <p><i>Mental health day services</i> – there will be no impact on service users as anyone with a mental health need who meets the Council's eligibility criteria will be able to access services using their personal budget.</p> <p><i>Workforce development</i> – there will be no impact on service users as a result of the proposed budget reduction.</p> <p>Staff affected by all of the proposed savings will be formally consulted (in line with agreed HR policies and procedures) if the proposals are accepted.</p>	
Relevance <i>Identify which strands are relevant to the area you are reviewing or changing</i>	Age	X
	Disability	X
	Gender Re-assignment	
	Race	
	Religion	
	Gender	
	Sexual Orientation	
	Marriage & Civil Partnership	
	Pregnancy & Maternity	
Information Gaps	<p>The majority of the identified savings have no direct impact on service users. However, we will monitor housing related support services and use of personal budgets for older people and people with mental health needs to ensure that services are maintained and assessed needs are appropriately met. Access to day services for older people and low services will be monitored as part of new contractual arrangements. The number of individuals with learning disability and /or mental health problem supported if a support worker in Employment Link is removed will also be monitored.</p> <p>As identified, reducing management may have an indirect impact on service users. It will be difficult to make specific links to any indirect impact but evidence such as increases in safeguarding and complaints will be monitored to assess whether there are any links to management savings.</p>	

What is the Impact	Eliminate Unlawful discrimination , harassment, victimisation, and any other conduct prohibited by the act N/A		
	Advance Equality of Opportunity , between people who share protected characteristics and those who don't N/A		
	Foster Good Relations , between people who share a protected characteristic and people who do not share it. N/A		
Addressing the impact	1. No Impact- No Major Change		
	2. Adjust/Change Policy		
	3. Adverse Impact but Continue The proposed reduction of staff to provide services to people with mental health problems and/or learning disability in Employment Link will potentially have an impact. However, the proposals will be monitored to ensure that individuals continue to receive an appropriate level of support to meet their assessed needs.		
	4. Stop/Remove Policy/Proposal		
Action identified	Responsible Officer	By When	How will this be evaluated?
Consultation with staff.	Jill Harrison, Assistant Director	31 January 2014	Staff will have been offered the opportunity to consider / comment on proposals and put forward alternative suggestions, in line with agreed HR policies and procedures.
Monitor services to carers.	Geraldine Martin, Head of Service	31 March 2015	Ongoing collection of performance information from Hartlepool Carers. Review of the results of the bi-annual Carers Survey.
Identify potential funding for Employment Link worker post.	Neil Harrison, Head of Service & Patrick Wilson, Employment Development Officer	31 March 2014	If funding is identified, the saving can be achieved without a post being deleted.
Monitor access to services as part of contract monitoring – day opportunities and low level support.	Jeanette Willis, Head of Strategic Commissioning	31 March 2015	Ongoing collection of performance information from provider(s).

ADULT SERVICES COMMITTEE REPORT



Report of: Director of Child & Adult Services and Chief Finance Officer

Subject: STRATEGIC FINANCIAL MANAGEMENT REPORT –
AS AT 31ST AUGUST, 2013

1. TYPE OF DECISION/APPLICABLE CATEGORY

For Information.

2. PURPOSE OF REPORT

- 2.1 The purpose of the report is to inform Members of the 2013/14 Forecast General Fund Outturn; 2013/14 Capital Programme Monitoring, and provide details for the specific budget areas that this Committee is responsible for.

3. BACKGROUND AND REPORTING ARRANGEMENTS 2013/14

- 3.1 The availability and reporting of accurate and up to date financial information will become increasingly important as future budget cuts are implemented and one-off resources are used up.
- 3.2 The Finance and Policy Committee will continue to receive regular reports which will provide a comprehensive analysis of departmental and corporate forecast outturns, including an explanation of the significant budget variances. This will enable the Finance and Policy Committee to approve a strategy for addressing the financial issues and challenges facing the Council.
- 3.3 To enable a wider number of Members to understand the financial position of the Council and their service specific areas each Policy Committee will receive a separate bi-monthly report providing:
- A brief summary of the overall financial position of the Council as reported to the Finance and Policy Committee;
 - The specific budget areas for their Committee; and
 - The total departmental budget where this is split across more than one Committee. This information will ensure Members can see the whole position for the departmental budget.

- 3.4 The latest report submitted to the Finance and Policy Committee on 18th October 2013 advised Members that there will be an overall underspend in the current year. The report also advised Members that this position reflects action taken by the Corporate Management Team to achieve underspends to help address the significant financial challenges facing the Council over the next few years and to fund one-off commitments not provided for in the approved 2013/14 budget as these items were not known at the time. The Corporate Management Team will seek to achieve budget underspends through a combination of robust management actions, including;
- holding posts vacant, which will help reduce the number of compulsory redundancies required to balance the 2014/15 budget;
 - achieving planned 2014/15 savings earlier;
 - careful management of budgets to avoid expenditure where this does not have an adverse impact on services; and
 - savings in interest costs by taking advantage of current interest rates structures. As reported previously a comprehensive review of this area has been completed which secured a permanent budget saving of £1m from 2014/15 in interest and loan repayment costs.
- 3.5 The report advised Members that there is a net forecast uncommitted underspend at the year end of between £807,000 and £1,482,000. As previously reported the forecast underspend range reflects seasonal and demand led budgets, which will not be certain until later in the year. Therefore it was previously recommended that these forecast resources should not be committed until the position is more certain.
- 3.6 In addition, Finance and Policy have previously determined that a decision will not be taken on the use of these forecast resources until the actual grant cuts for 2014/15 and 2015/16 are known. Consultation proposal issued by the Government over the summer indicated the grant cuts for 2014/15 and 2015/16 will be higher than indicated in the 2013 Spending Review and higher than the planning assumptions included in the Medium Term Financial Strategy, particularly for 2015/16. The availability of one-off resources from the 2013/14 outturn will not provide a permanent solution to higher grant cuts over the next two years. However, they will provide temporary funding and therefore provide a longer lead time to address higher grant cuts, if as expected these are confirmed by the Government in the Local Government Finance Settlement for the next two years, which is expected in November/December 2013.

4. 2013/14 FORECAST GENERAL FUND OUTTURN – Adult Services Committee

- 4.1 The following table sets out the overall budget position for the Child and Adult Services department budget broken down by Committee, together with a brief comment on the reasons for the forecast outturn.

Budget £'000	Description of Expenditure	August Projected Outturn Adverse/ (Favourable) Worst Case £'000	August Projected Outturn Adverse/ (Favourable) Best Case £'000	Comments
31,530	Adult Committee	(329)	(354)	Reason for forecast outturn - predominantly owing to staffing costs and management of contracted services offset by demographic pressures for services. Reason for change in forecast outturn - The favourable outturn projection has increased by between £95k and £120k since June owing to further underspends on staffing budgets and managed contract reductions, reducing the demographic pressures within this area.
21,199	Child Committee	95	(13)	Reason for forecast outturn - predominantly relates to Children and Families pressures. The range reflects the highly unpredictable and differing care needs within this area. This has been significantly offset by a favourable variance in relation to Education Psychology arising from increased income generation. Reason for change in forecast outturn - overall the Children's Committee outturn has not significantly changed since previously reported.
52,729	Total Child & Adult	(234)	(367)	
Creation of Reserves				
0	Children's - Education Psychology	100	100	From within the departmental underspend it is proposed to create a reserve to provide some certainty of funding for the service as schools convert to Academy status.
0	Creation of Reserves Total	100	100	
52,729	Total Child & Adult - Net of Reserves	(134)	(267)	

- 4.2 Further details of the specific budget areas this Committee is responsible for are provided in **Appendix A**.

5. CAPITAL MONITORING 2013/14

- 5.1 The 2013/14 MTFS set out planned capital expenditure for the period 2013/14 to 2015/16.
- 5.2 Expenditure against budget to the 30th August, 2013 for this Committee can be summarised in the table below and further details are provided in **Appendix B**.

Department	2013/14 Budget	2013/14 Actual to 31/08/2013	2013/14 Remaining Expenditure	2014/15 Rephased Expenditure	2013/14 Variance from Budget Adverse/ (Favourable)
	£'000	£'000	£'000	£'000	£'000
Adult Services	973	16	957	0	0
Total	973	16	957	0	0

- 5.3 As indicated in previous reports there is a longer lead in time for capital schemes and therefore it is not unusual for expenditure to be low in the first few months of the year, as the profile of expenditure for many of the schemes is in the second half of the year.

6. RECOMMENDATIONS

- 6.1 It is recommended that Members note the report.

7. REASONS FOR RECOMMENDATIONS

- 7.1 To update the Members on the Committees forecast 2013/14 General Fund Revenue budget outturn and provide an update on the Capital Programme for 2013/14.

8. APPENDICES

Appendix A attached.
Appendix B attached.

9. BACKGROUND PAPERS

Medium Term Financial Strategy Report referred to Finance and Policy Committee 31st May 2013 and 2nd August 2013.

Strategic Financial Management Report referred to Finance and Policy Committee 18th October 2013.

10. CONTACT OFFICERS

Gill Alexander
Director of Child & Adult Services
Gill.Alexander@hartlepool.gov.uk
01429 523910

Chris Little
Chief Finance Officer
Chris.little@hartlepool.gov.uk
01429 523003

REVENUE FINANCIAL MONITORING REPORT FOR FINANCIAL YEAR 2013/14 as at 31st AUGUST 2014

Overview:

Approved 2013/2014 Budget £'000	Description of Service Area	August		Director's Explanation of Variance
		Projected Outturn Variance - Adverse/ (Favourable) Worst Case £'000	Projected Outturn Variance - Adverse/ (Favourable) Best Case £'000	

Adult Services Committee				
0	Adult Education	0	0	
148	Carers & Assistive Technology	(5)	(5)	
3,596	Commissioning-Adults	(70)	(70)	
1,458	Commissioning-Mental Health	3	3	
10,126	Commissioning-Older People	105	80	This outturn projection is owing to continuing demographic pressures for Older People both in residential care and non-residential settings.
7,625	Commissioning-Working Age Adult	146	146	This outturn projection is owing to an increase in complex packages for individuals in the community.
183	Complaints & Public Information	7	7	
1,240	Departmental Running Costs	(107)	(107)	This favourable outturn relates to staffing underspends in this area.
1,173	Direct Care & Support Team	(150)	(150)	This favourable outturn relates to staffing underspends in this area. This area is volatile and can be impacted by external activity generated by hospital discharges.
375	LD & Transition Social Work	0	0	
2,332	Locality & Safeguarding Teams	(136)	(136)	This favourable outturn relates to staffing underspends in this area.
630	Mental Health Services	(47)	(47)	
1,081	OT & Disability Equipment	(95)	(95)	This favourable outturn relates to non-recurring underspends on various contracts.
381	Workforce Planning & Dev	0	0	
1,182	Working Age Adult Day Services	20	20	
31,530	Adult Services Total (before Creation of Reserves)	(329)	(354)	
Creation of Reserves (if applicable)				
0		0	0	
0	Creation of Reserves Total	0	0	
31,530	Adult Services Total - Net of Reserves	(329)	(354)	

PLANNED USE OF RESERVES

The above figures include the 2013/2014 approved budget along with the planned use of Departmental Reserves created in previous years.

The details below provide a breakdown of these reserves

Approved 2013/2014 Budget £'000	Description of Service Area	Planned Usage 2013/2014 £'000	Variance Over/ (Under) £'000	Director's Explanation of Variance
Adult Services Committee				
30	PCT Carers into Employment	30	0	
40	PCT Carers Funding	40	0	
110	Social Care Delayed Hospital Discharges	110	0	
180	Total	180	0	

ADULT SERVICES COMMITTEE

APPENDIX B

CAPITAL MONITORING REPORT PERIOD ENDING 31st AUGUST 2013

Project Code	A	EXPENDITURE IN CURRENT YEAR							2013/2014 COMMENTS
		B	C	D	E	F	G	H	
	Scheme Title	2013/14 Budget £'000	2013/14 Actual as at 31/08/13 £'000	2013/14 Expenditure Remaining £'000	Expenditure Rephased 2014/15 £'000	C+D+E 2013/14 Total Expenditure £'000	F-B 2013/14 Variance from budget £'000	Type of financing	
Adult Committee									
7234	Chronically Sick and Disabled Persons Adaptations	245	1	244	0	245	0	MIX	
8284	DAT Accommodation	10	0	10	0	10	0	GRANT	
7723	Resettlement - Campus Reprovisioning	115	0	115	0	115	0	GRANT	
8428	Havelock Upgrades Phase 2	204	15	189	0	204	0	MIX	Scheme on hold pending future plans and approvals.
8075	Short Break Capital Grants Pool	21	0	21	0	21	0	MIX	
8312	Social Care Transformation Capital Grant	367	0	378	0	378	11	GRANT	Balance of unused grant returned from completed scheme ref 8055.
8055	Warren Road Window Improvements	11	0	0	0	0	(11)	GRANT	Scheme complete. Balance returned to project 8312 Social Care Transformation Capital Grant Pot in line with delegated authority given via MTFS and grant conditions.
	Total	973	16	957	0	973	0		

Key

RCCO Revenue Contribution towards Capital

MIX Combination of Funding Types

UCPB Unsupported Corporate Prudential Borrowing

SCE ® Supported Capital Expenditure (Revenue)

GRANT

CAP REC

UDPB

SPB

Grant Funded

Capital Receipt

Unsupported Departmental Prudential Borrowing

Supported Prudential Borrowing