

ADULT SERVICES COMMITTEE AGENDA



Wednesday 23 March 2016

at 10.00 am

in Committee Room B, Civic Centre, Hartlepool

MEMBERS: ADULT SERVICES COMMITTEE

Councillors Atkinson, Beck, Belcher, Loynes, Richardson, Tempest and Thomas

1. **APOLOGIES FOR ABSENCE**

2. **TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS**

3. **MINUTES**

- 3.1 To receive the Minutes and Decision Record in respect of the meeting held on 7 March 2016 (*for information as previously circulated*).

4. **BUDGET AND POLICY FRAMEWORK ITEMS**

No items.

5. **KEY DECISIONS**

- 5.1 Day Opportunities – Consultation on Fairer Pricing Framework – *Director of Child and Adult Services*



6. OTHER ITEMS REQUIRING DECISION

No items

7. ITEMS FOR INFORMATION

7.1 Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17 – *Director of Child and Adult Services*

7.2 Implementation of the Care Act – *Director of Child and Adult Services*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

9. LOCAL GOVERNMENT (ACCESS TO INFORMATION) (VARIATION) ORDER 2006

EXEMPT ITEMS

Under Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in the paragraphs referred to below of Part 1 of Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) Order 2006.

10. OTHER ITEMS REQUIRING DECISION

10.1 Domiciliary Care for Older People: Future Options– *Director of Child and Adult Services – (para 3)*

11. ANY OTHER CONFIDENTIAL ITEMS WHICH THE CHAIRMAN CONSIDERS ARE URGENT

FOR INFORMATION:

Date of next meeting – to be arranged.



ADULT SERVICES COMMITTEE

MINUTES AND DECISION RECORD

7 March 2016

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

Present:

Councillor: Carl Richardson (In the Chair)

Councillors: Sandra Belcher and Brenda Loynes

Also Present:

In accordance with Council Procedure Rule 5.2 (ii) Councillor Jim Ainslie was in attendance as substitute for Councillor Sylvia Tempest and Councillor Rob Cook was in attendance as substitute for Councillor Stephen Thomas

Julie Parkes, Associate Director, Out of Hospital Care and Jill Foreman, Senior Clinical Professional, North Tees & Hartlepool NHS Foundation Trust
Maureen Lockwood, Evelyn Leck and Ruby Marshall - Healthwatch Representatives
T Wilson, HVDA
Frank Harrison – Years Ahead Forum
Members of the Public – Sue Little, Stella Johnson and Gordon Johnson

Officers: Jill Harrison, Assistant Director, Adult Services
Jeanette Willis, Head of Strategic Commissioning, Adult Services
Neil Harrison, Head of Service, Adult Services
Denise Wimpenny, Principal Democratic Services Officer

73. Apologies for Absence

Apologies for absence were submitted on behalf of Councillors Paul Beck, Sylvia Tempest and Stephen Thomas.

74. Declarations of Interest

None

75. Minutes of the meeting held on 15 February 2016

Received

76. Matters arising from the Minutes

In relation to Minute 69 and the Committee's request at the last meeting for information in relation to nursing care provision for under 65s, the Assistant Director reported that the CCG had provided the following information:-

- The CCG was supporting 119 Hartlepool residents under 65 who required nursing provision, 24 with learning disabilities, 59 with mental health needs, 33 with physical disabilities and 3 adults receiving fully funded continuing health care support
- Of the 39 places where this care was commissioned, 18 were in Hartlepool and 21 were out of the area.
- Some places where care was commissioned were identified as mental health and learning disability provision whilst others specialised in neurological rehabilitation and some people were being cared for in homes that predominantly catered for older people.

With regard to Minute 70, and the decision taken that the authority's contribution to the CQC consultation process be provided to a future meeting, the Assistant Director circulated a copy of the Council's response to the CQC consultation. Members were advised that the consultation was open until 14 March and anyone who wished to participate in the consultation could do so either individually or as an organisation.

Decision

That the information given be noted.

77. Hospital Discharge Update (*Director of Child and Adult Services*)

Type of decision

For information

Purpose of report

To update members of the Adult Services Committee in relation to North Tees & Hartlepool NHS Foundation Trust hospital discharge processes.

Issue(s) for consideration

The Assistant Director introduced the report which provided background information to Healthwatch Hartlepool's Hospital Discharge Project and the action plan that had been considered by the Committee in response to the recommendations.

In reviewing the action plan at the last meeting, a number of issues had been raised regarding hospital discharges which Members wished to address to representatives of North Tees & Hartlepool NHS Foundation Trust. These concerns included delays due to waiting for medication and/or transport, delays while waiting for a letter from a consultant and hospital discharges taking place after 7.00 pm.

The Chair welcomed representatives from the North Tees & Hartlepool NHS Foundation Trust. The representatives provided details of the ongoing work of the Trust and the changes that were taking place to support effective discharge which included the following:-

- introducing changes to pathways currently provided;
- changes to patient flow teams and discharge liaison;
- more communication and support around discharge;
- mapping patients through the system in more proactive manner;
- clinical strategy in terms of how people are supported moving out of hospital;

- reviewing nursing support later in the day, nursing plans, rapid response and community matron support;
- working later hours to avoid admissions to hospital;
- statistical information revealed that a high proportion of individuals could be treated effectively at home;
- Percentage of discharges over different periods excluding accident and emergency:-

- Midnight to 8.00 am	–	0.86%
- 8.00 am to 5.00 pm	–	62.37%
- 5.00 pm to 7.00 pm	–	24.17%
- 7.00 pm to 9.00 pm	–	10.37%
- 9.00 pm to midnight	–	2.23 %
- Transport arrangements;
- Transport providers – NEAS/own patient transport;
- Introduced daily huddles which are working well and extended discharge liaison to make sure discharge is successful;
- Reasons for delayed discharges – whilst some delays may be as a result of transport or medication issues upon examining individual cases some delays were as a result of the planning process that takes place in advance of organising transport or medication.

In the lengthy discussion that followed a number of comments/queries/issues were raised which included the following:-

- (i) A Member requested that the figures regarding discharges be provided by number as opposed to by percentage.
- (ii) In response to a query raised regarding the cost of utilising private ambulances for discharges, the representative advised that whilst this information was not to hand, assurances were provided that the Trust utilised their own transport service where possible. The Trust was currently examining current transport provision to ensure they could respond to the needs of the organisation.
- (iii) Various examples of discharges taking place in the early hours of the morning were shared with the

Committee and the impact of such discharges was debated. Views were expressed that there should be a cut off time for discharges to avoid any vulnerability or safety issues.

- (iv) In response to concerns that one elderly gentleman had been discharged via taxi in the early hours, the Trust representative advised that where possible arrangements were in place to try to support patients upon discharge by family or friends. However, each case was assessed individually and if it was safe to do so patients may be transported via taxi, the volunteer driver service or by the patient transfer service. The Associate Director for Out of Hospital Care agreed to investigate any individual cases of concern.
- (v) A number of concerns were raised regarding the post discharge support arrangements for patients living alone particularly the elderly and vulnerable. The Committee was advised that prior to discharge an assessment was made and patient choice was also considered. If patients expressed a desire to be discharged every effort would be made to accommodate that choice provided it was safe to do so.
- (vi) A member of the public raised concerns regarding the cost of utilising taxis for transporting patients, the potential risks as a result as well as the post discharge support arrangements for vulnerable individuals. The representatives reiterated that risk assessments were carried out prior to discharge and grocery packs were also available if the assessment highlighted a need.
- (vii) The additional pressures placed on GP's as a result of the decision to support more people at home and the role of the Rapid Response Team was questioned.
- (viii) The representatives responded to further issues raised in relation to the discharge process as well as discharge plans. Clarification was provided on the Care at Home Model which was due to be launched to support individuals with respiratory conditions, the role of the Rapid Response Team and Community Matron Service.
- (ix) The importance of assessment of need post discharge was further emphasised and the need to ensure any special needs were accommodated. The representative advised that work was currently ongoing around integrated pathways between hospital and home to

facilitate sharing information and to avoid the need for patients to provide information more than once.

- (x) Reference was made to the total number of discharges and the Committee was keen to receive discharge information categorised by age group
- (xi) Concerns were raised regarding the limited support available on wards for patients, particularly those with communication issues. The Committee was advised that there were meal time companions to assist where necessary and there were plans in place to extend visiting hours on the elderly wards to assist with supporting patients in this regard. The Chair queried why the red napkin system, recommended by Healthwatch, had not been implemented. The Assistant Director clarified that feedback from Healthwatch reports would normally be reported through the Health and Wellbeing Board. Disappointment was expressed that feedback in relation to this recommendation had not been communicated to Healthwatch. The representative agreed to explore this and provide feedback to Healthwatch following the meeting. In response to Members' comments on the importance of sharing information of this type the Associate Director advised that the team were currently working on a paper to summarise all of the initiatives linked to hospital discharge which was currently in a draft format, and would be shared with Healthwatch and this Committee on completion.

Decision

- (i) That the information given and comments of the Committee be noted.
- (ii) That the Trust provide the following additional information following the meeting:-
 - (a) Details of the figures regarding discharges be provided by number as opposed to by percentage.
 - (b) Additional discharge information by age group
 - (c) Feedback to Healthwatch in relation to the red flag system.
 - (d) Document summarising all initiatives relating to

hospital discharge.

Following a brief adjournment for a comfort break the meeting reconvened to consider the remaining items of business.

78. The 2015/16 Local Account (*Director of Child and Adult Services*)

Type of decision

Non-key

Purpose of report

To present to Adult Services Committee for approval the 2015/16 Local Account; a key mechanism for reporting back to citizens on performance in adult social care, and a means of engaging with citizens and consumers of our services around priorities and outcomes.

Issue(s) for consideration

The Assistant Director reported on the background to the establishment of the Local Account which was a key mechanism for councils to report back to citizens and consumers about performance.

The Local Account, attached at Appendix 1, set out the context of Adult Services including the role of Adult Services, aims, challenges, how the budget was spent and key facts about performance. The Local Account presented information in an accessible, simple and consistent format and its style reflected the overriding need to make it meaningful, relevant and accessible to the citizens and users of Adult Services in Hartlepool.

Decision

That the contents of the 2015/16 Local Account be noted and approved for publication.

79. Supporting People with Hearing Loss (*Director of Child and Adult Services*)

Type of decision

Non-key

Purpose of report

To seek approval from Adult Services Committee for the updated Supporting People with Hearing Loss Strategy 2016-2019.

Subject to approval, to support the revised strategy being presented to the Health & Wellbeing Board for approval and monitoring of the action plan.

Issue(s) for consideration

The report provided background information in relation to the development of the Supporting People with Hearing Loss Strategy 2016-19.

Various methods of consultation and engagement had been utilised including a presentation in 2015 to the Hartlepool Deaf Centre which provided officers with a forum in which to share progress on the previous strategy and action plan.

With regard to the development of the strategy, a draft strategy and action plan had been developed and shared with Hartlepool Deaf Centre and Healthwatch Hartlepool for comments. The strategy and associated action plan, attached as appendices to the report, would be used to set the benchmark for improvement over the next four years. It was envisaged that the Hartlepool Deaf Centre would provide the forum to support delivery of the strategy and monitor progress against the action plan.

A discussion ensued following presentation of the report during which Members shared personal experiences of the difficulties managing hearing loss. The impact of hearing loss was discussed including isolation issues, and the benefits of teaching sign language in schools was highlighted. It was also suggested that information of this type should be included in Hartbeat.

Decision

- (i) That the updated Supporting People with Hearing Loss Strategy 2016-2019 be approved.
- (ii) The Committee supported the presentation of the revised Strategy to the Health and Wellbeing Board for approval and monitoring of the action plan.

80. Engagement with Older People (*Director of Child and Adult Services*)

Type of decision

For information

Purpose of report

To update the Committee on the outcome of an engagement event with older people and action taken as a result, as well as plans for further engagement.

Issue(s) for consideration

The Head of Strategic Commissioning provided background information to the commitment given by the Council to facilitate up to four engagement events per year with older people and to feedback information from these events to the Adult Services Committee for consideration.

The first of these events was held in October 2015. The event was well attended and feedback from those in attendance was positive. The event held on 23 October posed a number of questions to the older people in attendance in relation to social isolation, GP and Community Health Services, accommodation and dementia. The purpose of the questions was to identify a broad range of issues that might affect older people and also to be able to identify themes for discussion at future events.

Details of feedback from the questions together with responses provided by Adult Services was provided, as set out in the report.

It was noted that the next engagement event would be held on 14 March at 2.00 pm and would cover transport, community safety, Hartlepool Now and Ipad related issues.

Members welcomed the events and were pleased to note the approach to public engagement and the Council's early commitment to the Dementia Friendly Initiative. Compliments and thanks were conveyed on behalf of the Committee to the Adult Social Care Teams for their hard work in progressing initiatives of this type.

The benefits of luncheon clubs were discussed including the various clubs that were available in the town. It was suggested that this information be circulated under separate cover following the meeting. The need to effectively publicise the next consultation event was also emphasised and the representatives in attendance from Healthwatch and the 50 Plus Forum agreed to take this forward.

Decision

- (i) That feedback from the initial engagement event and the responses provided by Adult Services be noted.
- (ii) That the plans for a second event, which Members were invited to attend, be noted.
- (iii) That Members encourage older people from their wards to attend future events and contribute to discussions.
- (iv) Clarification on luncheon clubs be provided under separate cover following the meeting.

81. Independent Living Fund Update (*Director of Child and Adult Services*)

Type of decision

For information

Purpose of report

To provide the Committee with an update regarding the transfer of funding and responsibilities relating to the Independent Living Fund (ILF) from July 2015.

Issue(s) for consideration

The Assistant Director reported on the background to the

transfer of funding and responsibilities relating to the Independent Living Fund (ILF) from July 2015. Details of how the Council had managed the new responsibilities was provided as set out in the report. The approach agreed in Hartlepool resulted in no impact on existing ILF users in 2015/16, through maintaining the status quo in terms of both expenditure and contributions.

With regard to the financial considerations, it was reported that the Council received a Section 31 non-ring fenced grant and was calculated by the DCLG based on the number of ILF users at 30 June 2015. 43 people in Hartlepool were in receipt of ILF at the point of transfer, receiving annual funding of £670,000. The amount transferred by the DCLG in 2015/16 (pro rata for 9 months) was £507,000

Decision

- (i) The Committee noted the anticipated ILF funding allocations for the period 2016/17 to 2019/2020 which were not yet confirmed.
- (ii) The Committee noted that, if the anticipated allocation was confirmed, ILF contributions would remain unchanged.
- (iii) The Committee noted the response to the DCLG consultation and agreed to provide any additional comments.
- (iv) That further reports on this issue be received should there be significant changes to the funding allocation for future years that resulted in budget pressures.

82. Annual Complaints Report 1 April 2014 – 31 March 2015 *(Director of Child and Adult Services)*

Type of decision

For information

Purpose of report

To present the Annual Complaints Report of the Child and Adult Services Department for the period 1 April 2014 to 31 March 2015.

Issue(s) for consideration

The Assistant Director presented the annual report, attached at Appendix 1 which summarised the complaints and compliments received within 2014/15 and provided information to demonstrate the learning that had arisen from complaints and the actions implemented as a result.

In 2014/15, 56 compliments had been received in relation to Adult Services and examples of these were included in Appendix 1 and 17 complaints had been received in 2014/15 which was a slight increase on the previous year when 15 complaints had been received.

Decision

That the contents of the Annual Complaints Report for 2014/15 be noted and that the report be published online.

The meeting concluded at 12.30 pm

P J DEVLIN

CHIEF SOLICITOR

PUBLICATION DATE: 14 MARCH 2016

ADULT SERVICES COMMITTEE

23 March 2016



Report of: Director of Child and Adult Services

Subject: **DAY OPPORTUNITIES - CONSULTATION ON FAIRER PRICING FRAMEWORK**

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Key Decision, test (ii) applies: impact on one or more Council Wards.
Forward Plan Ref: CAS (036/15).

2. PURPOSE OF REPORT

2.1 To seek approval from the Adult Services Committee to implement a fairer pricing framework for adult day opportunities.

3. BACKGROUND

3.1 Hartlepool Borough Council has provided building based day opportunities at Warren Road and Havelock since the early 1970s. The service has historically been designed around the limitations of the buildings, that were at best designed around an industrial and rehabilitative model of community care, and have been added to or adapted in an attempt to meet current standards.

3.2 Members will be aware of the development of a new Centre for Independent Living, which is due for completion in 2016, following consultation and approval in 2014.

3.3 A report presented to members on 6 July 2015 provided an overview of the proposed process, namely to:-

- Engage and consult with people using services their families and carers;
- Provide an update to the Learning Disability Partnership Board;
- Undertake a telephone consultation with all carers; and
- Report back to Adult Services Committee for a decision regarding implementation of a new service model and pricing framework from September 2016.

4. PROGRESS

- 4.1 A telephone consultation was conducted with 91 family carers on 17 and 18 September 2015. Family carers were given an update on the proposed changes within day services and the interim arrangements in the event of service disruption during the construction of the new Centre for Independent Living.
- 4.2 A presentation at the Hartlepool Learning Disability Partnership Board on 20 November 2015 gave members a brief overview of the existing pricing framework and provided several case studies highlighting the existing inequities in the system and some scenarios based on the proposed new model.
- 4.3 A development day was planned in November 2015 with people who use services and family carers. Unfortunately only 6 people confirmed they would attend so a decision was made to cancel the event and speak to the 6 people individually.
- 4.4 The purpose of the engagement undertaken to date was to provide details of the proposed Fairer Pricing Framework model and to put forward proposals for a new service model that could operate across 7 days over three sessions, namely 9am – 12.30, 12.30 to 4pm and 4pm to 7.30pm. Delivery over seven days and provision of evening sessions would be developed incrementally over time, and subject to identified need.
- 4.5 In addition to this proposal was the consideration of how individuals deploy their resource allocation to meet their need for transport. The Council's Integrated Transport Unit offers specialist support for those with specific mobility issues, as well as the 'Safe on the Move in Hartlepool' scheme. The role of the ITU was presented as a one page summary with an indicative cost per journey.
- 4.6 All existing service users have individualised transport plans. There is potential for people to travel using alternative transport with staff support, and these options will be explored on an individual basis.
- 4.7 Meetings were also held with representatives of Healthwatch Hartlepool on 7 December and 15 February 2016 to describe the proposed model and existing inequality in the pricing framework. Examples were shared and comments noted.

5. CURRENT PRICING FRAMEWORK

- 5.1 The current pricing framework is based on a number of factors and includes a set price for access to day services based on Personal Social Services Expenditure collection (PSSEX1) calculations. The rate is £41.60 per day (£20.80 per session) for all individuals who access services, which includes

transport to and from the Centres, and the rate has remained at this level for the last 10 years.

- 5.2 This price is not a 'real' charge in that no physical cash is received, rather it forms part of the individual's Personal Budget. This is calculated using the Council's Resource Allocation System, based on the individual's care needs.
- 5.3 In addition to this cost, individuals requiring a meal contribute to a subsidised meal service (currently £3.00 per meal) and transport costs where excursions/activities take place. It is proposed to continue to charge separately for a meal where required. The cost will increase to £4.00 for a two-course meal from September 2016.
- 5.4 The 2015/16 net budget for the day services is £1.2m. If the current pricing framework resulted in actual income being received, the income generated would only recover £0.75m of these costs. Therefore, the Council is effectively subsidising internal day service provision by £0.45m.
- 5.5 In addition, there is no discretion to increase or reduce the rate linked to an individual's need and the support required. Currently the same rate is applied to an individual who may travel independently to the service and need no physical support as would be applied to a person who requires support from 2 staff at all times (including personal care and support at meal times) and access to specialist transport.
- 5.6 The current charge for day services is not fair and equitable and does not appropriately reflect the level of support an individual requires.

6. IMPLEMENTING A FAIRER PRICING FRAMEWORK

- 6.1 It was proposed in July 2015 that the service would consult and engage on the potential to adopt a fair and equitable pricing framework that would be directly linked to the support requirements of the individual.
- 6.2 To achieve a fair and equitable pricing framework it is proposed to charge separately for day services and for transport (so that only those using transport are required to pay) and to charge per session.
- 6.3 It is proposed to introduce a charging policy based on the direct costs associated with day service provision.
- 6.4 The individuals using day services can be categorised into four 'bands' depending on their level of need:-

Level 1	Very Low / Own Support
Level 2	Low Support
Level 3	Medium Support
Level 4	High Support (Effectively 1:1)

- 6.5 Using a weighting between the bands based on the approximate staffing ratios required and the current numbers of users in each band results in the following proposed charges per session:-

Level 1	£8	per session
Level 2	£12	per session
Level 3	£20	per session
Level 4	£40	per session

- 6.6 Transport provision consists of specially enhanced and equipped vehicles which pick-up and drop-off the individual at their home and, where required, a passenger transport assistant is provided.

- 6.7 It is proposed to introduce a charge for transport that accounts for whether a passenger transport assistant (PTA) is required or not. The proposed charges are:-

No PTA	£10	return journey
With PTA	£18	return journey

- 6.8 The proposals provide assurance that there are no equality or diversity implications, as charges are linked to individual needs.

- 6.9 As stated in paragraph 5.2, the proposed charges are against an individual's personal budget allocation. An individual only contributes towards the cost of their package of support (which may include day services) if, following a means-test financial evaluation, they are assessed as having the ability to do so.

- 6.10 A financial impact assessment has been completed which confirms that, under the proposed changes, no service user would be required to contribute more towards their care as they are either already contributing their maximum or have been assessed as nil contribution.

- 6.11 A summary of the proposed changes, which identifies the current number of users, which band they are likely to be in and the potential impact on their personal budget resource allocation, is attached as **Appendix 1**.

- 6.12 The proposed charges would effectively result in no change for the 55 users in Levels 1 and 2. The 44 Level 3 users may be affected, depending on whether they used the transport provision and the 21 Level 4 users would be reassessed to ensure their resource allocation was fully reflective of their needs.

- 6.12 It may be that some users in Levels 3 and 4 have to make different decisions on how they spend their personal budget between day services and the other support they receive.

- 6.13 Changes to the pricing framework will also impact on the level of income received from the NHS in respect of jointly-funded packages of care. 18 of

the 21 people identified as requiring Level 4 support are at least part funded by the NHS in recognition of their health needs. Any increases in the proposed costs would need to be reflected and agreed at Continuing Health Care panel and at the individual's annual review. However, it is likely that NHS income will increase as the current pricing framework understates the cost of day service provision when the NHS contribution to a package of care is calculated.

- 6.3 Due to the relatively small numbers of people potentially affected, officers will engage in face to face discussions to ensure people are able to make an informed choice about their provision if the revised pricing framework is introduced.

7. FINDINGS FROM ENGAGEMENT

- 7.1 65% of people who expressed a view supported the principles of a fairer pricing framework, 35% wanted the system to remain unchanged.
- 7.2 78% of respondents agreed that the price should reflect need with 78% of respondents also agreeing that their resource allocation should reflect this.
- 7.3 There was some concern expressed by three families of people identified as Level 4 who were worried they would not receive the same level of service as they currently do, as they may need to reduce their use of other services, such as respite care, to meet the increased costs of day services from within their existing personal budget. .
- 7.4 One family in Level 3 asked for a re-assessment to ensure they were placed at the right level.
- 7.5 It is important to note that, of those 21 people who fell within Level 4, none would be expected to contribute more as a result of the proposed changes. There may however be a need to review an individual's indicative resource allocation to ensure that resources are being deployed effectively to meet all identified eligible needs. It is proposed that this work would be done on a 1-1 basis with care coordinators re-assessing as necessary.
- 7.6 Healthwatch Hartlepool were involved in the consultation and officers met with representatives on two occasions. In addition officers presented a short report at the Learning Disability Partnership Board. Healthwatch representatives raised concerns in relation to the availability of transport to the new CIL. In response, officers held meetings with the Integrated Transport Unit and Taxi Licensing. Taxi Licensing have recently made changes to register rear loading Wheelchair Accessible Vehicles (WAV) to encourage taxi providers to add these vehicles to their existing fleet. These vehicles are more cost effective for taxi companies to purchase. The Integrated Transport Unit also supports a number of community groups through its 'Community Travel Club'.

- 7.7 It has not been possible to encourage any of the major bus companies to provide a direct link to the CIL. However anyone accessing the CIL via a day service offer has an individualised transport plan, and the new CIL will utilise staff to support independent travel training.
- 7.8 Healthwatch representatives were also interested to understand how other Local Authorities compared in respect of their day service unit costs. **Appendix 2** provides a summary of expenditure and unit costs details by north east authorities and statistical neighbours.

8. RISK IMPLICATIONS

- 8.1 There remains a risk that implementation of the proposed new charging policy may lead to a decline in the numbers of people attending the service. This will be mitigated through 1:1 discussions with service users and family carers and any impact will be monitored over time.

9. FINANCIAL CONSIDERATIONS

- 9.1 The proposed new framework will be based on the existing financial envelope for day services and it is anticipated that there will be no negative financial impact for the department, should individuals continue to choose to attend the new service. The department however is committed to self directed support and should an individual choose to use their resource allocation elsewhere, they will be supported to do so, a policy decision that has been operating since 2006 and was recently upheld in the Care Act 2014.
- 9.2 The current budget for day services is based on the provision of two sessions (09:00-12:30 and 12:30-16:00), Monday to Friday for 49 weeks of the year. The service is looking at expanding the offer to potentially include evenings (16:00-19:30) and some weekend sessions. There is no additional budget provision for this, so any increased costs would have to be funded from within the existing budget. Any such proposals will be developed over time depending on demand and budget provision.
- 9.3 There remains a risk, as with any service, that if prices are deemed too high some individuals may choose to use their resource allocation and purchase from other providers and cease to attend the day service. It is not anticipated that the proposed charging structure will result in this happening. If there is any such impact, the service will need to respond by attracting new users and / or reducing overhead costs.
- 9.4 In considering the issues outlined in this report Members are reminded that significant additional Government Grant cuts will be made over the period 2016/17 to 2018/19. As a result the Council faces a budget deficit for the next three years of between £16.3m and £18.3m, depending on the level of Council Tax increases approved by Members over this period. The

recommended strategy for managing the 2016/17 budget position is predicated on the use of significant one-off resources to provide a longer lead time to make permanent budget reductions and the following table summarises the annual budget deficits. Detailed proposals for achieving 2017/18 and 2018/19 budget reductions will need to be developed. Any additional budget pressures will increase the budget cuts which will need to be made and will need to be referred to the Finance and Policy Committee for consideration.

	Revised Forecast based on actual grant cut and 1.9% Council Tax increase £'m	Revised Forecast based on actual grant cut and 1.9% Council Tax increase and 2% Social Care Precept £'m
2016/17	4.749	4.179
2017/18	9.638	8.663
2018/19	3.945	3.443
Total	18.332	16.285
Cut as %age 15/16 budget	21%	19%

10. LEGAL CONSIDERATIONS

10.1 There are no legal considerations associated with this report.

11. EQUALITY AND DIVERISTY CONSIDERATIONS

11.1 The fairer pricing framework aims to provide a fair and equitable cost, based on the needs of an individual and the level of care and support they require.

11.2 Financial contributions are assessed against the existing contribution policy which was approved by Adult Services Committee in 2013/14.

12. STAFF CONSIDERATIONS

12.1 There are no staffing considerations associated with this report.

13. ASSET MANAGEMENT CONSIDERATIONS

13.1 There are no asset management considerations associated with this report.

14. Section 17

14.1 There are no Section 17 considerations associated with this report

15. SUMMARY

- 15.1 No concerns were received from people who use services or family carers of those individuals assessed as Level 1 and Level 2. Of those who assessed as Level 3 or Level 4, no formal objections have been received and the Council will continue to ensure that services provided meet the eligible assessed needs of individuals.
- 15.2 Further discussions will continue with care coordinators and, if the proposals are agreed, the new pricing framework will be implemented at the point of annual review for each individual from 1 September 2016 onward.

16. RECOMMENDATIONS

- 16.1 It is recommended that the Adult Services Committee approves the implementation of a fairer pricing framework for adult day services from September 2016.

17. REASONS FOR RECOMMENDATIONS

- 17.1 Implementation of a fairer pricing framework ensures that charges for services are fair and equitable, as they will be linked to the needs of individuals and the level of support they require.
- 17.2 Existing services will be maintained and enhanced through the development of a new service model, delivered in a purpose built facility, linked to a fairer pricing framework.

18. CONTACT OFFICER

Neil Harrison
Head of Service (Child & Adult Services)
Tel: 01429 523751
Neil.harrison_1@hartlepool.gov.uk

Charges including Transport without a Passenger Transport Assistant (PTA)

Level of Support Required	No. of Service Users	Cost Per Session	Transport per day excluding a PTA (£10.00)	Total Cost Per Day (inc Trans)	Current Daily Rate	Increase/(Decrease) on current daily rate
		£	£	£	£	£
1 - Very Low/Own Support	12	8.00	10.00	26.00	41.60	(15.60)
2 - Low Support	43	12.00	10.00	34.00	41.60	(7.60)
3 - Medium Support	44	20.00	10.00	50.00	41.60	8.40
4 - High Support (approx 1:1)	21	40.00	10.00	90.00	41.60	48.40
	120					

Charges including Transport requiring a Passenger Transport Assistant (PTA)

Level of Support Required	No. of Service Users	Cost Per Session	Transport per day requiring a PTA (£18.00)	Total Cost Per Day (inc Trans)	Current Daily Rate	Increase/(Decrease) on current daily rate
		£	£	£	£	£
1 - Very Low/Own Support	12	8.00	18.00	34.00	41.60	(7.60)
2 - Low Support	43	12.00	18.00	42.00	41.60	0.40
3 - Medium Support	44	20.00	18.00	58.00	41.60	16.40
4 - High Support (approx 1:1)	21	40.00	18.00	98.00	41.60	56.40
	120					

Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Final Release: Unit Costs by CASSR

5.1

Appendix 2

North East Authorities

Colour Key:

=	Residential & Nursing
=	Home Care
=	Direct Payments
=	Day Care / Day Services



Higher than National Average

England Average

Lower than National Average



LEARNING DISABILITY

2.36A Average gross expenditure per day care or day services client for adults aged 18-64 with a Learning disability

Sunderland	Gateshead	Stockton	Newcastle	South Tyneside	England	Redcar & Cleveland	Durham	Northumberland	Middlesbrough	Hartlepool	Darlington	North Tyneside
551.6	380.4	354.1	333.2	313.3	294.5	292.7	244.8	241.2	215.9	210.2	192.1	187.6

Hartlepool

2013-14 Breakdown		2012-13
1,279 / 117	Gross Cost / Clients	Hartlepool 197.9
1,267 / 116	Gross Cost / Clients	Hartlepool 197.9
12 / 1	Gross Cost / Clients	Hartlepool 192.3
1,279 / 91	Gross Cost / Clients	Hartlepool 150.2

2.37 Average gross expenditure per OWN PROVISION day care or day services client for adults aged 18-64 with a Learning disability

Redcar & Cleveland	Sunderland	Newcastle	Stockton	Northumberland	Gateshead	England	Durham	Hartlepool	South Tyneside	Middlesbrough	Darlington	North Tyneside
2,203.1	643.8	437.8	384.1	383.2	365.6	324.4	293.4	210.0	197.3	196.2	193.8	106.9

2.38 Average gross expenditure per day care or day services client for adults aged 18-64 with a Learning disability PROVIDED BY OTHERS

South Tyneside	Gateshead	Sunderland	Stockton	North Tyneside	Middlesbrough	England	Hartlepool	Durham	Darlington	Newcastle	Northumberland	Redcar & Cleveland
842.2	455.3	393.8	302.7	300.0	267.6	261.1	230.8	206.6	182.1	173.3	119.0	66.2

2.45 Average gross weekly expenditure on day care or day services per adult aged under 65 with a Learning disability receiving day care or day services at 31 March

Sunderland	Gateshead	Redcar & Cleveland	South Tyneside	Stockton	England	Northumberland	Newcastle	North Tyneside	Durham	Hartlepool	Darlington	Middlesbrough
715.2	519.0	485.6	352.4	346.5	344.6	319.8	311.5	311.2	296.0	270.3	205.9	196.1

Appendix B

Personal Social Services: Expenditure and Unit Costs, England - 2013-14, Final Release: Unit Costs by CASSR

APPENDIX 2

Family Statistical Neighbours



Higher than National Average

England Average

Lower than National Average



LEARNING DISABILITY

2.36A	Average gross expenditure per day care or day services client for adults aged 18-64 with a Learning disability
2.37	Average gross expenditure per own provision day care or day services client for adults aged 18-64 with a Learning disability
2.38	Average gross expenditure per day care or day services client for adults aged 18-64 with a Learning disability provided by others
2.45	Average gross weekly expenditure on day care or day services per adult aged under 65 with a Learning disability receiving day care or day services at 31 March

	Sunderland	Stoke	Barnsley	Stockton	Tameside	St Helens	South Tyneside	England	Redcar & Cleveland	Oldham	Knowsley	North East Lincolnshire	Halton	Middlesbrough	Rotherham	Hartlepool	Rochdale
	551.6	455.2	362.7	354.1	386.8	328.1	313.3	294.5	292.7	285.3	274.8	250.7	241.4	215.9	215.6	210.2	202.1
2.36A	Redcar & Cleveland	Sunderland	Tameside	Stoke	St Helens	Stockton	Barnsley	Knowsley	England	Oldham	Halton	Rochdale	Hartlepool	South Tyneside	Middlesbrough	Rotherham	North East Lincolnshire
	2,203.1	643.8	558.9	462.5	393.2	384.1	364.0	337.5	324.4	285.7	236.7	211.5	210.0	197.3	196.2	189.8	0.0
2.37	South Tyneside	Rotherham	Stoke	Sunderland	Stockton	Oldham	Halton	Middlesbrough	England	North East Lincolnshire	Hartlepool	Rochdale	Knowsley	St Helens	Barnsley	Redcar & Cleveland	Tameside
	842.2	582.6	421.8	393.8	302.7	285.3	279.5	267.6	261.1	250.7	230.8	190.5	189.6	149.0	115.4	66.2	65.8
2.38	Sunderland	Redcar & Cleveland	Barnsley	Stoke	South Tyneside	Tameside	Stockton	England	Halton	Rotherham	St Helens	Oldham	Rochdale	Knowsley	Hartlepool	North East Lincolnshire	Middlesbrough
	715.2	485.6	406.3	366.8	352.4	351.4	346.5	344.6	337.2	336.9	333.2	306.7	295.7	286.5	270.3	245.2	196.1
2.45																	

ADULT SERVICES COMMITTEE

23 March 2016



Report of: Director of Child & Adult Services

Subject: MOVING FORWARD TOGETHER – THE VISION FOR ADULT SERVICES IN HARTLEPOOL 2014-17

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 No decision required; for information.

2. PURPOSE OF REPORT

2.1 To provide the Adult Services Committee with an update on implementation of 'Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17'.

3. BACKGROUND

3.1 Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17 was approved by the Adult Services Committee in July 2014.

3.2 The document outlined what had been achieved in recent years and set out the vision for adult services. The annual action plan outlined priorities for 2015/16 and the actions required to move forward with implementation.

4. THE HARTLEPOOL VISION FOR ADULT SERVICES 2014-17

4.1 The vision for adult services in Hartlepool reflects the direction of travel set out in the national policies over the last few years together with the Health and Social Care Act 2012 due to be implemented from 2015.

4.2 The principles underpinning the national strategy for adult social care are; personalised services and increased integration between health and social care, with a leaner, more outcomes-focused role for the public sector. The overall aim is for people to stay healthy and actively involved in their communities for longer thereby delaying or avoiding the need for targeted services.

- 4.3 Public Health, now located within local authorities, will play a significant role in this preventative agenda. People who require services should be encouraged to remain as independent as possible and retain maximum control over the process.
- 4.4 The transformational change of adult social care began in 2006 and will continue to be driven forward by three key component principles:
- Preventing ill-health and intervening early to keep people well;
 - Focusing on community-based approaches and public health initiatives to encourage people to take care of their own health and well-being;
 - Delivering personalised care and support through personal budgets.
- 4.5 Local authorities will continue to work with other statutory, independent, voluntary and third sector providers, people who use services and their carers to shape provision and increase the number of people determining how they are supported or commissioning their own services.

5. PROGRESS AGAINST PRIORITIES

- 5.1 The action plan that is attached as **Appendix 1** provides the framework for the detailed work required to deliver the vision.
- 5.2 A progress update is provided for each of the agreed priorities.
- 5.3 An action plan for 2016/17 will be developed following approval of the Council Plan, which was presented to Adult Services committee on 15 February 2016.

6. RISK IMPLICATIONS

- 6.1 There are no risk implications directly associated with this report. Strategic risks within adult services are monitored through the Council Plan, as presented to Adult Services Committee on 7 February 2016.

7. FINANCIAL CONSIDERATIONS

- 7.1 There are no financial considerations directly associated with this report.
- 7.2 In considering the issues outlined in this report Members are reminded that significant additional Government Grant cuts will be made over the period 2016/17 to 2018/19. As a result the Council faces a budget deficit for the next three years of between £16.3m and £18.3m, depending on the level of Council Tax increases approved by Members over this period. The recommended strategy for managing the 2016/17 budget position is predicated on the use of significant one-off resources to provide a longer lead time to make permanent budget reductions and the following table

summarises the annual budget deficits. Detailed proposals for achieving 2017/18 and 2018/19 budget reductions will need to be developed. Any additional budget pressures will increase the budget cuts which will need to be made and will need to be referred to the Finance and Policy Committee for consideration.

	Revised Forecast based on actual grant cut and 1.9% Council Tax increase £'m	Revised Forecast based on actual grant cut and 1.9% Council Tax increase and 2% Social Care Precept £'m
2016/17	4.749	4.179
2017/18	9.638	8.663
2018/19	3.945	3.443
Total	18.332	16.285
Cut as %age 15/16 budget	21%	19%

8. LEGAL CONSIDERATIONS

8.1 There are no legal considerations associated with this report.

9. CHILD AND FAMILY POVERTY CONSIDERATIONS

9.1 There are no identified child and family poverty considerations.

10. EQUALITY AND DIVERSITY CONSIDERATIONS

10.1 There are no identified equality and diversity considerations.

11. STAFF CONSIDERATIONS

11.1 There are no staffing considerations associated with this report.

12. ASSET MANAGEMENT CONSIDERATIONS

12.1 There are no asset management considerations associated with this report.

13. RECOMMENDATIONS

13.1 It is recommended that the Adult Services Committee notes progress made to implement the vision for adult services and receives a further update in March 2017.

14. REASONS FOR RECOMMENDATIONS

- 14.1 Adult services continue to undergo significant changes in the way services are designed, developed and delivered to reflect a modern system of social care that is built on personalisation, partnerships and increasingly integrated services across organisations, where relevant and appropriate, as well as keeping people safe and enabling them to retain maximum choice and independence.
- 14.2 Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17 reflects these aspirations. The high level action plan aims to translate this vision into reality.

15. CONTACT OFFICER

Jill Harrison
Assistant Director – Adult Services
Hartlepool Borough Council
jill.harrison@hartlepool.gov.uk

MOVING FORWARD TOGETHER: ACTION PLAN 2015/16

Objective	Activities/Milestones	Progress Update
<p>Establish integrated health and social care pathways / services that facilitate people living in their own homes, avoid unnecessary admissions to hospital and enable timely and safe hospital discharges, through implementation of the Better Care Fund (BCF) plan.</p>	<ul style="list-style-type: none"> • Increase the number of people using assistive technology as a means to remain independent. • Increase capacity in the early intervention service to facilitate hospital discharge. • Integrate first points of contact between adult social care and health. 	<ul style="list-style-type: none"> • The number of telecare users continues to increase on a monthly basis. The target for 2015/16 was 1,600 users. As at end of November 2015, there were over 2,190 users. • Additional social work and Occupational Therapy capacity has been funded through the Better Care Fund. Seven day working to support hospital discharges has been piloted and is currently being evaluated. • First point of contact teams across health and social care are now co-located and options for further integration are being explored.
<p>Deliver reablement services that enable people to maximise their abilities and develop the skills and capacity to retain their independence for as long as possible.</p>	<ul style="list-style-type: none"> • Maximise the effectiveness of reablement services in reducing ongoing care needs. 	<ul style="list-style-type: none"> • 78% of people who receive a reablement package have no ongoing care needs following the period of reablement. • 92% of reablement goals are achieved following a period of reablement. • In order to maintain this performance additional resources have been identified from the Better Care Fund from April 2016 and closer links will be established with falls prevention and Occupational Therapy Services.

<p>Implement the 2015/16 requirements of the Care Act and prepare for the 2016/17 requirements.</p>	<ul style="list-style-type: none"> • Understand workforce implications and develop a training programme to meet identified needs. • Development of a new online advice and information resource. 	<ul style="list-style-type: none"> • Workforce implications were assessed and a training programme delivered. Further training has been commissioned for 2016/17 in response to issues identified by frontline staff. • Hartlepool Now was formally launched in October 2015 and continues to be further developed and promoted.
<p>Implement 'Making Safeguarding Personal' and ensure that local arrangements for safeguarding are compliant with the Care Act.</p>	<ul style="list-style-type: none"> • Continue to use the Making Safeguarding Personal approach to involve service users or their representatives in the safeguarding process. • Ensure that local arrangements via Tees Safeguarding Adults Board (TSAB) and Hartlepool Local Executive Group (LEG) are Care Act compliant. 	<ul style="list-style-type: none"> • The approach used in Hartlepool has been evaluated and continues to be used, supplemented by the Expert by Experience service. • TSAB and supporting sub groups are well established, supported by LEGs in the four Local Authority areas. Policies and procedures have been revised to ensure that they are Care Act compliant. Other developments include a Training Strategy, Quality Assurance Framework, Self-Audit Tool, Communication and Engagement Strategy and a TSAB website with a regular e-bulletin. • Procedures to manage Safeguarding Adult Reviews (SARs) and monitor Action Plans developed following SARs have been strengthened and lessons learned are shared on a regular basis across partners.

<p>Implement the actions identified by the Mental Health Implementation Plan to improve mental health services for the people of Hartlepool.</p>	<ul style="list-style-type: none"> • Continue to work through the mental health Forum to raise awareness of mental health issues within Hartlepool, and to improve outcomes for people with mental health needs. 	<ul style="list-style-type: none"> • The Hartlepool Mental Health Forum promotes collaborative working across statutory, private and voluntary sector organisations in partnership with people who use mental health services, their carers and families. • Hartlepool Borough Council and all key stakeholders have signed up to the Crisis Care Concordat. • World Mental Health Day promoted in Hartlepool, focused on the topic of dignity. • Additional capacity funded within the mental health teams to support the increased pressure on the Approved Mental Health Professional function.
<p>Build community capacity and low level support services that increase choice and reduce social isolation.</p>	<ul style="list-style-type: none"> • Use the Better Care Fund to commission support for people with long term conditions / disabilities, including voluntary sector provision. • Explore further opportunities to tackle social isolation. 	<ul style="list-style-type: none"> • A range of services continue to be funded via the Better Care Fund for people with sensory loss and long term conditions. • Work is underway with the Fire Brigade to explore opportunities for more collaborative working. A range of services are available including luncheon clubs and social activities. The Council continues to commission a handyperson service and signposting services, as well as a Dementia Advisory Service. Hartlepool Now provides people with information on the support available within their local community.

<p>Improve pathways and services to meet the needs of individuals with dementia and their families / carers.</p>	<ul style="list-style-type: none"> • Develop a Dementia Advisory Service that supports people with dementia and their families / carers. • Create a dementia friendly community. 	<ul style="list-style-type: none"> • A Dementia Advisory Service has been commissioned through the Better Care Fund. This is co-located with 'The Bridge'; a town centre hub for advice and information about dementia and support available. • Hartlepool has been accredited as a Dementia Friendly Community and work continues to raise awareness and encourage involvement.
<p>Develop an independent living centre that improves outcomes for adults with a disability and / or long term condition</p>	<ul style="list-style-type: none"> • Development of the new independent living centre to support adults with disabilities and / or long term conditions, with services targeted to support health and wellbeing, employment and promoting independence. 	<ul style="list-style-type: none"> • The development of the independent living centre is underway and it is expected that the centre will be operational in autumn 2016.
<p>Ensure that people with learning disabilities receive good quality, outcome focused care and support, including those covered under the Winterbourne View Concordat recommendations.</p>	<ul style="list-style-type: none"> • Support the delivery of the high level action plan for Winterbourne View. • Continue to develop employment opportunities for people with disabilities. 	<ul style="list-style-type: none"> • Funding secured for Hartlepool to pilot seven day working and provision of a crisis bed, alongside regional work to improve training and support independent sector providers, with the aim of preventing placement breakdown and hospital admissions. • Employment of adults with learning disabilities continues to be more than double the national average. The new independent living centre will have a focus on employment and links to projects such as the Waverley Terrace Allotment, which provides options for skills development and the Economic Regeneration team.

<p>Review systems, learn lessons from surveys and complaints and develop the workforce to ensure that staff are supported and working safely and effectively.</p>	<ul style="list-style-type: none"> • Review systems and paperwork to ensure Care Act compliance and reduce duplication. • Disseminate learning from complaints on an ongoing basis and ensure that changes are made where required. • Provide development opportunities for staff in response to identified needs or changes in legislation. 	<ul style="list-style-type: none"> • Assessment and review documentation has been reviewed and improved. The Direct payment process has been reviewed to ensure that it reflects new legislation and is easily navigated. • Learning from complaints is shared regularly through e-mails updates and Divisional Manager Meetings. A Quality Assurance Framework has been developed to bring together learning from complaints, service user feedback and surveys, to inform practice development and practice standards. • A range of training and development opportunities are available and staff generally report that they feel supported and able to access relevant development opportunities.
---	---	--

ADULT SERVICES COMMITTEE

23 March 2016



Report of: Director of Child & Adult Services

Subject: IMPLEMENTATION OF THE CARE ACT

1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required; for information.

2. PURPOSE OF REPORT

2.1 The purpose of this report is to provide the Adult Services Committee with an update on the implementation of the Care Act.

3. BACKGROUND

3.1 The Care Act introduced reforms to the provision of care and support and underlines the need for councils to promote wellbeing, prevention and independence. It also introduces a new national eligibility criteria and new rights for carers and children in transition to adult services.

3.2 The Care Act draws together a range of health and social care legislation built-up over seventy years and creates a single, modern law that clarifies and simplifies what kind of care and support people can expect.

3.3 From April 2015 a number of new duties and requirements have been introduced or strengthened, including:

- New wellbeing and prevention duties;
- New duties regarding provision of information and advice;
- New market shaping duties;
- A national eligibility criteria;
- New duties regarding assessments for carers;
- Statutory requirements in respect of Personal Budgets and Support Plans;
- Statutory requirements to offer deferred payment agreements.

4. IMPACT FOR LOCAL AUTHORITIES

4.1 The Care Act was expected to have a major impact on Local Authorities in terms of how they assess needs and deliver care and support. The areas where there was expected to be the greatest impact were as follows:

4.1.2 Preventing Needs for Care & Support

Councils must provide, or arrange the provision of, preventative services which help prevent or delay the development of care and support needs for individuals and carers, or help to reduce existing care and support needs.

4.1.3 Provision of Information, Advice and Advocacy

Councils are required to ensure that there is comprehensive information and advice about care and support services in their area and ensure the availability of independent advocates to support people to be involved in key processes, such as assessment and care planning, where the person would otherwise be unable to be involved.

4.1.4 Meeting Duties for Carers' Assessments

Councils have a duty to carry out assessments for all carers, and carers no longer have to be providing substantial care on a regular basis to be eligible for an assessment.

4.2 In order to implement the Care Act, Local Authorities are required to:

4.2.1 Quality & Safeguarding

Respond to safeguarding enquiries, set up a Safeguarding Adults Board, undertake safeguarding reviews and share information with key partners.

4.2.2 Workforce

Ensure the whole social care workforce (including those not directly employed by the council) has the required capacity, skills and knowledge to implement the Care Act effectively.

4.2.3 Commissioning

Develop the quality and range of services that local people want and need, including integrating care and support with health and housing where this delivers better care and promotes well-being.

5. IMPLEMENTING THE CARE ACT IN HARTLEPOOL

5.1 An Implementation Steering Group was established to oversee Care Act implementation, supported by three sub groups focused on:

- Operational and Workforce Issues
- Advice and Information
- Finance, Commissioning and Performance

5.2 Following approval by the Adult Services Committee, the 2014/15 Care Act Implementation Grant was used to support this work through:

- Appointment of additional staff to provide project management capacity, develop public information and review of policies and procedures to accommodate the new requirements of the Care Act; and
 - procurement of a new IT solution to replace the previous Hartlepool Now website and provide a more interactive means of people accessing the information and advice that they need.
- 5.3 Staff briefings were held for all adult services staff in January / February 2015 with further information shared through newsletters, brief guides and an e-learning platform that allows large numbers of the social care workforce to demonstrate understanding and compliance with the Care Act.
- 5.4 A review of how carers are supported through Direct Payments was undertaken and a new approach implemented from 1 April 2015 which made the system more transparent and equitable.
- 5.5 Policies and procedures and documentation for assessment, review and support planning has undergone a fundamental review to ensure compliance with the Care Act, while also aiming to simplify the current system and reduce duplication for frontline staff.
- 5.6 The Teeswide Safeguarding Adults Board has been established as the statutory safeguarding board for the four Tees Local Authorities with an Independent Chair and a Business Unit established to support safeguarding work across Tees. A Designated Safeguarding Manager has been identified for Hartlepool and a Safeguarding Adult Review has been instigated following the murder of a vulnerable adult, in line with Care Act requirements.
- 5.7 Work is underway through the implementation of the Better Care Fund to explore how services can be better integrated across health and social care.
- 5.8 Care Act leads continue to meet across the region to share good practice and work collaboratively on areas where a shared approach is beneficial.

6. NATIONAL CARE ACT STOCK TAKE

- 6.1 The Care Act stock take was developed by the Department of Health, Association of Directors of Adult Social Services and the Local Government Association to map progress on a national basis.
- 6.2 The fifth stock take for Hartlepool, submitted in November 2015, indicated no major concerns in relation to Care Act implementation in 2015/16.
- 6.3 Headline feedback on the national findings from the stocktake indicates that 87% of Councils are on track with embedding the changes resulting from the Care Act, with 13% reporting that they are only slightly behind, but that Councils have concerns about budgets for 2016/17 and beyond.

6.4 The stocktake focused on issues relating to markets and workforce and key findings are summarised below:

- 85% of Councils identified that implementation of the national living wage was a challenge.
- 47% cited nursing shortages and recruitment of nurses as a specific challenge.
- 93% reported that fluctuations in emergency admissions and delayed discharges have had an impact on the capacity of the local provider market.

7. RISK IMPLICATIONS

7.1 Risks had previously been identified in relation to the planned implementation of financial reforms from April 2016. The implementation of financial reforms has now been delayed until 2020 which defers the risks until a new implementation date is confirmed.

8. FINANCIAL CONSIDERATIONS

8.1 The Council received revenue allocations as follows for 2015/16:

Allocation	Funding for 2015/16
Better Care Fund	£266,000
New Burdens: Additional Assessments	£217,000
New Burdens: Deferred Payments	£155,000
New Burdens: Additional Support for Carers	£116,000
Total	£754,000

8.2 This funding was used to manage demand within care management teams through additional staffing, as well as supporting advice and information provision, support for carers and provision of advocacy services.

8.3 For 2016/17, the Local Government Finance Settlement removed the specific New Burdens grant funding received for the Care Act and instead incorporated this element of funding into the main Revenue Support Grant. For Hartlepool this equated to a reduction in funding of £200,000 compared to the 2015/16 allocations. The funding within the Better Care Fund remains at the same level as 2015/16.

8.4 The element of funding that had been allocated towards early additional assessments and the implementation of the Care Cap had not been fully allocated, owing to the government delaying the introduction of the Care Cap until April 2020 and therefore the possibility of an in-year funding reduction. Although it has been confirmed there will be no reductions in the current year's allocation, this uncommitted element will be used to manage the 2016/17 reduction.

- 8.5 In considering the issues outlined in this report Members are reminded that significant additional Government Grant cuts will be made over the period 2016/17 to 2018/19. As a result the Council faces a budget deficit for the next three years of between £16.3m and £18.3m, depending on the level of Council Tax increases approved by Members over this period. The recommended strategy for managing the 2016/17 budget position is predicated on the use of significant one-off resources to provide a longer lead time to make permanent budget reductions and the following table summarises the annual budget deficits. Detailed proposals for achieving 2017/18 and 2018/19 budget reductions will need to be developed. Any additional budget pressures will increase the budget cuts which will need to be made and will need to be referred to the Finance and Policy Committee for consideration.

	Revised Forecast based on actual grant cut and 1.9% Council Tax increase £'m	Revised Forecast based on actual grant cut and 1.9% Council Tax increase and 2% Social Care Precept £'m
2016/17	4.749	4.179
2017/18	9.638	8.663
2018/19	3.945	3.443
Total	18.332	16.285
Cut as %age 15/16 budget	21%	19%

9. LEGAL CONSIDERATIONS

- 9.1 There are no legal considerations associated with this update.

10. CHILD AND FAMILY POVERTY CONSIDERATIONS

- 10.1 There are no child and family poverty considerations associated with this update.

11. EQUALITY AND DIVERSITY CONSIDERATIONS

- 11.1 The Care Act aims to improve access to services and increase equity through the introduction of national eligibility criteria.
- 11.2. No equality and diversity considerations have been identified linked to local implementation.

12. STAFF CONSIDERATIONS

- 12.1 There are no staffing considerations associated with this update.

13. ASSET MANAGEMENT CONSIDERATIONS

- 13.1 There are no asset management considerations associated with this update.

14. RECOMMENDATIONS

- 14.1 It is recommended that the Adult Services Committee note progress in relation to implementation of the Care Act and feedback from the latest national stocktake.

15. REASONS FOR RECOMMENDATIONS

- 15.1 The update has been presented to provide the Committee with assurance that the Care Act has been implemented.

16. CONTACT OFFICER

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