



Policy and Performance - Families and Wellbeing Committee

Date:	Tuesday, 1 December 2015
Time:	6.00 pm
Venue:	Committee Room 1 - Wallasey Town Hall

Contact Officer: Lyndzay Roberts
Tel: 0151 691 8262
e-mail: lyndzayroberts@wirral.gov.uk
Website: <http://www.wirral.gov.uk>

AGENDA

1. MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST / PARTY WHIP

Members are asked to consider whether they have any disclosable pecuniary interests and/or any other relevant interest in connection with any item(s) on this agenda and, if so, to declare them and state the nature of the interest.

Members are reminded that they should also declare whether they are subject to a party whip in connection with any item(s) to be considered and, if so, to declare it and state the nature of the whipping arrangement.

2. MINUTES (Pages 1 - 8)

To approve the accuracy of the minutes of the last meeting of the Families and Wellbeing Policy and Performance Committee held on 8 September 2015.

3. MINUTES OF THE CHILDREN SUB-COMMITTEE - 23 SEPTEMBER 2015 (Pages 9 - 14)

4. REPORT OF THE CHAIR FROM MEETING OF THE HEALTH & CARE PERFORMANCE PANEL (Pages 15 - 20)

To consider the reports of the Chair from the meetings of the Health & Care Performance Panel

- 28th September 2015 (Attached)
- 25th November 2015 (To Follow)

5. ALL AGE DISABILITY STRATEGY (Pages 21 - 56)

6. DAY SERVICES LOCAL AUTHORITY COMPANY (LAC) WIRRAL EVOLUTIONS - UPDATE (Pages 57 - 98)

7. HEALTHWATCH WIRRAL - UPDATE REPORT (Pages 99 - 104)

8. FAMILIES AND WELLBEING DASHBOARD QUARTER 2 REPORT (INCLUDING PUBLIC HEALTH) (Pages 105 - 128)

9. FINANCIAL MONITORING 2015/16 QUARTER 2 REPORT (Pages 129 - 138)

10. WORK PROGRAMME (Pages 139 - 146)

POLICY AND PERFORMANCE - FAMILIES AND WELLBEING COMMITTEE

Tuesday, 8 September 2015

Present:

Councillor D Roberts (in the Chair)

Councillors	P Brightmore	W Clements
	A Davies	B Berry
	T Johnson	D Burgess-Joyce
	T Norbury	P Hayes
	W Smith	C Povall
	I Williams	A Brighthouse
	J Williamson	

Also Present:

Mrs H Shoebridge, Parent Governor
Ms K Prior, Healthwatch Wirral
Dr P Naylor, Wirral Clinical Commissioning Group

Deputies:

Councillor J Stapleton (in place of Councillor M McLaughlin)

14 **MEMBERS' CODE OF CONDUCT - DECLARATIONS OF INTEREST / PARTY WHIP**

Councillor A Davies declared a Personal Interest in Item 3 Notice of Motion – Mental Health Challenge and Item 10 – Report of the Chair from Meetings of the Health & Care Performance Panel by virtue of her employment at Cheshire and Wirral Partnership.

15 **CHAIRS ANNOUNCEMENTS**

The Chair welcomed Ms Karen Prior representing Healthwatch Wirral to her first meeting of the Committee.

16 **MINUTES**

RESOLVED:

That the Minutes of the Families and Wellbeing Policy and Performance Committee held on 30 June 2015 be approved as a correct record.

17 NOTICE OF MOTION - MENTAL HEALTH CHALLENGE

The Chair advised that at the meeting of the Council held on 6 July 2015 (minute 64 refers), the following Notice of Motion proposed by Councillor T Anderson and seconded by Councillor L Rennie was referred by the Mayor to this Committee for consideration.

In accordance with Standing Order 7 (6), Councillor Anderson had been invited to attend the meeting in order for him to be given an opportunity to explain the Motion. In accordance with Standing Order 7 (5), any recommendation from the Committee in relation to the Notice of Motion would be referred to the Council. Any debate at Council should take place upon the recommendation of the Committee and there should be no separate debate upon the motion itself.

Councillor Anderson asked the Committee to support the Motion in relation to the Mental Health Challenge and support the appointment of an elected member to act as 'mental health champion' across the Council.

Members gave their full support to the Motion and indicated that they felt this would go some way in bringing services together to support Mental Health.

The Director of Adult Services reported that at a recent stakeholder event, partners looked at the Mental Health Strategy as part of the whole health and wellbeing agenda and felt that this was a strong challenge and that the 10 key challenges needed to happen in a broader approach not just mental health.

A Member asked for clarification as to who would be responsible for appointing an appropriate 'Champion'.

MENTAL HEALTH CHALLENGE

Council notes that:

- (1) mental health is becoming an increasing concern, with one in five people having a mental health condition at any one time.
- (2) only a quarter of people with a mental health condition receive any treatment for it.
- (3) mental ill-health has economic and social cost of £105bn a year, accounting for 28% of the total burden of disease but only 13% of NHS spending.
- (4) mental health provision is not just about supporting those with the most severe conditions but providing an integrated and holistic support to the community.

Furthermore, Council notes the excellent initiative of several leading mental health charities in developing the “Mental Health Challenge” and the resources they are giving to local authorities.

Council therefore resolves to take on the mental health organisations challenge by:

- (a) Appoint an elected member as ‘mental health champion’ across the Council.
- (b) Identify a lead officer for mental health to link in with colleagues across the Council.
- (c) Follow the implementation framework for the mental health strategy where it is relevant to the Council’s work and local needs.
- (d) Work to reduce inequalities in mental health in our community.
- (e) Work with the NHS to integrate health and social care support.
- (f) Promote wellbeing and initiate and support action on public mental health for example through our joint health and wellbeing strategy.
- (g) Tackle discrimination on the grounds of mental health in our community.
- (h) Encourage positive mental health in our schools, colleges and workplaces.
- (i) Proactively engage and listen to people of all ages and backgrounds about what they need for better mental health.
- (j) Sign up to the Time to Change pledge.

RESOLVED:

That the Council be advised that the Families and Wellbeing Policy and Performance Committee fully supports the Notice of Motion in relation to the Mental Health Challenge.

18 UPDATE ON 'BECOMING A DEMENTIA-FRIENDLY COUNCIL'

The Committee considered a briefing note of the Director of Adult Social Services in relation to becoming a dementia friendly Council.

The Director of Adult Social Services highlighted that in December 2014 the Council had resolved to support the Dementia Friends Initiative. This included encouraging staff and elected members to become dementia friends and to consider whether they may wish to become dementia champions. In response to the subsequent debate in Council about the progress of the resolution, there was a request for the Chief Executive to ensure actions detailed within the Motion to Council were implemented to include becoming a dementia friendly council.

In response to the resolution, the Director of Adult Social Services gave Members an update in to relation to the actions undertaken so far.

A Member, who had undertaken the dementia awareness training, suggested that in-house courses be made available to staff to attend in their workplace giving them easier access to training.

RESOLVED:

That the briefing note on becoming a dementia friendly Council be noted.

19 **SAFEGUARDING ANNUAL REPORT 2014/15**

The Committee considered a presentation from the Corporate Safeguarding Manager updating on the Wirral Safeguarding Childrens Board's (WSCB) Annual Report (14-15) and Business Plan (15-16).

The presentation detailed the Board's statutory objectives and functions and structure; the local background and context for 2014/15 and the progress to date against the seven priorities set for 2014/15 including domestic violence; child sexual exploitation; neglect and early help.

The Corporate Safeguarding Manager highlighted the WSCB's key activities and outlined the business plan for 2015/16 detailing the five key priorities which included; safeguarding, child sexual exploitation and domestic abuse.

In response to comments, the Corporate Safeguarding Manager indicated that Operation Encompass was a Merseyside scheme whereby schools officers along with Merseyside Police worked together to ensure that child victims of domestic violence were better cared for. The scheme saw Merseyside Police pledge to inform schools the very next day if a pupil had experienced a domestic violence incident in their home the night before.

The aim was to give schools the information they needed in order to look after that Childs needs in the aftermath of what may be one of the most distressing things they would ever witness.

Members indicated that they would like to see a programme in schools that tackled issues such as appropriate relationships and body confidence. In response, the Corporate Safeguarding Manager indicated that discussions regarding further support and training were being held with primary headteachers.

A Member thanked the Corporate Safeguarding Manager for the training sessions arranged for Members in relation to child sexual exploitation, which had included a performance of 'Chelsea's Choice' and a production from Wirral Youth Theatre. She wished them well for the future and suggested that awareness raising of child sexual exploitation needed to start earlier in primary schools; concern was also raised that programmes such as this had not been rolled out to catholic schools.

In response to a Member, the Corporate Safeguarding Manager indicated that the Council could not afford to be complacent when it came to child sexual exploitation as there was still a lot of work to be done to ensure that children are being supported.

A Member suggested that outside funding from local business could be sought to enable the continuation of the roll out of 'Chelsea's Choice'.

RESOLVED:

That the Corporate Safeguarding Manager be thanked for his update.

20 **FAMILIES AND WELLBEING DASHBOARD (INCLUDING PUBLIC HEALTH)**

The Committee considered the report of the Strategic Director Families and Wellbeing which detailed the Quarter 1 (April – June 2015) performance against delivery of the Families and Wellbeing Directorate Plan. The performance report was attached as Appendix 1 and set out progress against a suite of agreed key performance indicators.

Introduced by the Team Leader – Performance/Scrutiny, the report set out a series of amendments to the Families & Wellbeing Directorate Plan 2015/16. These were as a result of the impact of the final 2014/15 year-end performance data and the development of the technical specification for the performance measures within the plan. The amendments were set out as Appendix 2.

The Corporate Plan 2015/16 (and supporting Directorate Plans) had been superseded by the Wirral Council Plan 2020 Vision and they still formed the basis of the in-year performance management framework. A new Performance Management Framework would be developed for the Council Plan once the associated delivery plan had been finalised.

In relation to the performance indicator regarding the rate of Children in Need (CIN) per 10,000, the Director of Children's Services indicated that Wirral had a high number of CIN children which were currently under review, following this review some children could 'step down' to (early help) and others could 'step up' to a child protection plan as they may have a greater need.

In response to a Member, in relation to the backlog of change of circumstances claims in relation to adults with learning disabilities, the Director of Adult Social Services indicated that there had been a problem implementing the new system, however the new team were now working on the backlog and improving processing times.

In relation to the number of hospital admissions (10-24 year olds as a result of self-harm), the Children's Services Director indicated that head teachers had raised concerns, in particular about the lack of information given about their pupils who had presented to hospital for treatment as a result of self-harm. The Department had developed a pathway for children who self-harm and delivered a training program with schools to ensure that where possible that if a child was admitted information would be shared.

In response to a Member in relation to the take up of universal infant free school meals, the Director of Children's Services indicated that she would provide a briefing note in relation to this and an update in relation to pupil premium.

In response to Members, the Team Leader – Performance/Scrutiny agreed to re-circulate the data regarding opiate users which had been omitted from the report

RESOLVED:

That the report be noted.

21 **FINANCIAL MONITORING 2014/15 END OF YEAR REPORT AND 2015/16 QUARTER 1 REPORT**

The Committee considered the report of the Acting Section 151 Officer setting out the financial monitoring information in a format which was consistent across the Policy and Performance Committees. The report aimed to give Members sufficient detail to scrutinise budget performance for the Directorate. Financial information for Quarter 1 (April-June 2015) which was reported to Cabinet on 27 July 2015 was attached to the report.

The Director of Adult Social Services introduced the report indicating that the savings to be made were particularly challenging as the Directorate was not an easy area to take money out of, but savings did need to be identified.

In response to a Member in relation to the reduction to the Public Health Budget, the Director of Adult Social Services indicated that the option appraisals were yet to be completed.

RESOLVED:

That the Financial Monitoring report be noted.

22 **COUNCIL PLAN: DELIVERY PLAN PROPOSALS FOR PEOPLE PRIORITIES**

The Committee considered a verbal presentation from the Director of Children's Services in relation to the Wirral Plan: A 2020 Vision.

The Director of Children's Services highlighted the Council's priorities in taking Wirral forward; People, Business and Environment; how the Council was to deliver its plan; timetable; initial scrutiny; Phase 2 – future work programmes and next steps.

In response to a Member, the Scrutiny Officer indicated that a workshop for Members would be held to enable them to look at the People priority in late October/early November 2015.

RESOLVED:

That the presentation be noted.

23 **POLICY INFORM BRIEFING PAPER**

The Committee considered the report of the Strategic Director, Families and Wellbeing presenting Members with the September Policy Briefing papers which included an overview of ongoing and recent national legislation, bills presented to Parliament and emerging policies.

RESOLVED:

That the contents of the Policy Briefing papers be noted.

24 **REPORT OF THE CHAIR FROM MEETING OF THE HEALTH & CARE PERFORMANCE PANEL HELD ON 20 AUGUST 2015**

The Chair of the Health and Care Performance Panel introduced the report which provided feedback on the key issues arising from the meeting held on 20 August 2015.

The Director of Adult Social Services introduced the report and updated Members on the following activity undertaken by the Panel.

- Review of the developing Out of Hours services as well as the preparations for winter pressures
- The Chair on behalf of the Panel had submitted information to the CQC regarding the forthcoming planned inspection of Wirral University Teaching Hospital
- To discuss outcome from the CQC inspection of Cheshire & Wirral Partnership Trust (CWP) undertaken in June following release of the inspection report.

RESOLVED:

That the report of the meeting of the Health and Care Performance Panel held on 20 August 2015 be noted.

25 **WORK PROGRAMME**

The Committee considered the report of the Chair of the Committee, updating on the progress and the activity proposed for this Committee in relation to its agreed Work Programme.

The Chair updated the Committee on the following:

- Safeguarding Review – Still to be completed. It was hoped that the report would be included on the Committee agenda of 2nd November 2015.
- Avoiding Hospital Admissions Task and Finish Group – First meeting has been held to discuss the scope of the review
- Day Centre Report – Chair had suggested that a report regarding day centres and the establishment of Wirral Evolutions be added to the work programme for the P&P Committee.

A Member suggested that CRI the company commissioned to provide drug and alcohol services be requested to provide the Committee with an update on progress to date.

RESOLVED:

That the Work Programme be noted.

CHILDREN SUB-COMMITTEE

Wednesday, 23 September 2015

Present:

Councillors	W Clements	M McLaughlin
	A Davies	T Norbury
	P Hayes	W Smith

Apologies

Councillor A Brighthouse
H Shoebridge

1 MEMBERS' CODE OF CONDUCT - DECLARATION OF INTERESTS

Members of the Sub-Committee were asked to consider whether they had any disclosable pecuniary interests and/or any other relevant interest in connection with any items on the agenda and if so, to declare them and state the nature of the interest.

Councillor W Clements declared a non pecuniary interest by virtue of her employment in an Early Years Centre and also that she sits on the Advisory Board for West Wirral Children's Centre.

Councillor T Norbury declared a non pecuniary interest by virtue that his sister is employed at Children's Services.

2 APPOINTMENT OF CHAIR

On a motion by Councillor Wendy Clements and seconded by Councillor Angela Davies it was –

Resolved – That Councillor Moira McLaughlin be appointed Chair of the Children Sub-Committee.

3 APPOINTMENT OF VICE CHAIR

On a motion by Councillor Moira McLaughlin and seconded by Councillor Angela Davies it was –

Resolved – That Councillor Wendy Clements be appointed Vice Chair of the Children Sub-Committee.

4 **MINUTES OF THE ATTAINMENT SUB-COMMITTEE**

Resolved – That the accuracy of the minutes of the Attainment Sub-Committee held on 4 March 2015 be approved as a correct record.

5 **TERMS OF REFERENCE**

The Children Sub-Committee's Terms of Reference, which had been considered and approved by the Families and Wellbeing Policy and Performance Committee on 30 June 2015, were submitted for Members' information.

Resolved – That the Terms of Reference for the Children Sub-Committee be noted.

6 **EARLY YEARS AND CHILDREN'S CENTRES**

The Director of Children's Services reported that the Early Years and Children's Centre Review, which outlined a new delivery model, had been agreed by Cabinet on 27 July 2015.

Members were advised that the new delivery model was supported by an outcomes framework to ensure that Wirral's youngest children have the best possible start in life which would be evidenced through their readiness for school and improvements in the numbers of children achieving a Good Level of Development in the Early Years Foundation Stage.

The Senior Early Years Manager was in attendance at the meeting and informed Members that the service was linked with the Wirral Plan: A 2020 Vision and that the emphasis would be on ensuring that every child would have the emotional, social and development skills to be ready to start school and learn.

The model agreed was a weighted funded model which took account of levels of deprivation and need across pre-determined reach footprints within constituency areas. Members were advised that outcome focused provision would be delivered in an integrated way with partners in local communities through three hubs, six satellite buildings and commissioned services included those through two nursery schools. The delivery model would be able to respond to changes to government guidance, work effectively with key partners, offer a more targeted provision based on need and realign the service to enable it to more easily and readily adapt in the future.

Members were informed that ongoing communication and consultation with parents of children under 5 years, prospective parents, parents and key stakeholders would take place.

The Senior Early Years Manager advised that the delivery model would enable Wirral to work towards any changes from a Government level and that Wirral would be in a position to be more adaptive to the future.

The Chair proposed that a task and finish group be established to consider how policies and services could be developed and ensure the work carried out is in line with that undertaken by Local Members of Parliament.

Resolved –

(1) That the report be noted.

(2) That a task and finish group be established to consider how policies and services could be developed and ensure the work carried out is in line with that undertaken by Local Members of Parliament.

7 SPECIALIST SERVICES REDESIGN

The Director of Children's Services provided Members with details of the re-design of Specialist Services (Children's Social Care).

The Head of Service informed Members that the re-design of Specialist Services was driven by the need to improve outcomes for children and that a clearer remit of social work functions would assist partnership working, particularly with education and health colleagues. There had been an emphasis on creating smaller social work teams to allow for closer management oversight. The focus was on permanency and the four dedicated children in care teams would allow social workers more focused time to offer more practical and emotional support to looked after children. The new team reconfiguration would allow for better planning with young people to return home, where safe and feasible, move into other permanent arrangements or into care leaver arrangements where appropriate to do so. There had been no reduction in social work posts and over 85% of cases had been moved over into the Children in Care Service.

As part of the re-design of the teams, a comprehensive caseload weighting system was being put in place which would provide support to ensure that caseloads are manageable for social workers and that staff have the capacity and experience to work with individual children and families to identify and respond to their level of need.

In response to questions from Members, the Head of Service advised that an average caseload was now between 23 and 26 children and that work was being undertaken with newly qualified social workers to ensure their cases were not too complex. Members were also advised that the data collected enabled managers to view live assessments, tasks that needed completing and by what timescales. Data was also being collected on a weekly basis.

Further to questions from Members, the Head of Service advised that no additional resources were available for refugees and asylum seekers and that they would be dealt with as and when they had been referred.

Resolved – That the Director of Children’s Services be thanked for the report and that the report be noted.

8 **SCHOOL STANDARDS REPORT, INCLUDING IMPACT ON 'NARROWING THE GAP' - OFFICER REPORT**

The Director of Children’s Services provided a presentation upon ‘Narrowing the Gap’.

Members were advised that in respect of the percentage of good level of development 2015, Wirral had increased by nearly 7% from last year and was the second best in the region and that the overall gap in attainment at the earliest assessment stage had decreased by 2.2%. At Key Stage 1 children had achieved Level 2+ and there had been an improvement in each area. Age related expectations from 2013 to 2015 were almost all above the national standard and children who received Free School Meals who didn’t achieve age related expectations had improved over the last two years. During 2015, Children Looked After in Key Stage 1 had increased in attainment for all in Borough children and in Key Stage 2 Grammar Punctuation and Spelling had increased by 4 percentage points, writing by 2 percentage points and mathematics by 1 percentage point. Also in 2015 Free School Meal Pupils who did not achieve Age Related Expectations had decreased since 2013. Children Looked After in Key Stage 2 had improved in each area and there had been a significant increase of two levels of progress in reading.

In respect of provisional GCSE results for 2015, eight Wirral schools results had decreased from 2014, two schools were below the current Department of Education floor target and there had been a slight deterioration in provisional GCE results which was a national trend however the number of entries had increased.

Resolved – That the Director of Children’s Services be thanked for her presentation.

9 **WORK PROGRAMME FOR FUTURE MEETINGS**

Members considered an item in respect of exception reports highlighting positive and negative aspects arising from school Ofsted inspection reports to be considered at a future meeting.

In addition Members also considered arranging visits to schools with the widest gap in attainment as well as schools which had been more successful in narrowing the gap.

Resolved –

- (1) That the work programme continue to be developed**
- (2) That an item in respect of exception reports, highlighting positive and negative aspects arising from school Ofsted inspection reports, be considered at a future meeting.**
- (3) That arrangements be made for Members to visit schools with the widest gap in attainment as well as schools which had been more successful in narrowing the gap.**

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WIRRAL COUNCIL

FAMILIES AND WELLBEING POLICY & PERFORMANCE COMMITTEE –

1ST DECEMBER 2015

HEALTH AND CARE PERFORMANCE PANEL – 25TH NOVEMBER 2015

SUBJECT:	<i>FEEDBACK FROM THE MEETING OF THE HEALTH & CARE PERFORMANCE PANEL HELD ON 28TH SEPTEMBER 2015</i>
REPORT OF:	<i>THE CHAIR OF THE PANEL (COUNCILLOR MOIRA MCLAUGHLIN)</i>

1.0 PURPOSE OF THE REPORT

This report provides feedback regarding the key issues arising from the meeting of the Health & Care Performance Panel held on 28th September 2015.

2.0 ATTENDEES

Members:

Councillors Moira McLaughlin (Chair), Alan Brighthouse, Wendy Clements, David Burgess-Joyce, Denise Roberts

Other Attendees:

Clare Fish (Strategic Director, Families and Wellbeing, Wirral Borough Council)

Karen Prior (Wirral Healthwatch)

David Jones (Complaints Manager, Adult Social Services, Wirral Borough Council)

Alan Veitch (Scrutiny Officer, Wirral Borough Council)

Visitor for part of the meeting:

Gareth Lawrence (Deputy Director of Finance, Wirral University Teaching Hospital)

Apologies:

Councillors Phillip Brightmore and Treena Johnson

Lorna Quigley (Director of Quality and Patient Safety, Wirral Clinical Commissioning Group)

Amanda Kelly (Senior Manager, Market Transformation and Contracts, Adult Social Services, Wirral Borough Council)

3.0 NOTES FROM THE PREVIOUS PANEL MEETING HELD ON 20TH AUGUST 2015

The notes from the previous meeting, held on 20th August 2015, were approved by members.

4.0 WIRRAL UNIVERSITY TEACHING HOSPITAL – FINANCE REPORT: UPDATE

Gareth Lawrence (Deputy Director of Finance, Wirral University Teaching Hospital) provided a report which updated members regarding the current financial position at Wirral University Teaching Hospital (WUTH). This issue had previously been included on the work programme of the Panel due to a Monitor investigation of the financial position at WUTH. The Monitor investigation was announced earlier in 2015.

The Trust is planning to complete the 2015/16 financial year with a deficit of £13.468m. As at the end on month 5, the Year-to-Date figure was £7.482m which was broadly in line with plans.

During discussion with members, a number of issues emerged:

- The Trust is currently in the first year of a two year financial recovery plan that has been agreed by Monitor. Performance against this recovery plan is on target.
- Monitor continues to support the Trust with its financial recovery plan with monthly meetings. One of the measures that Monitor has with all Foundation Trusts is the Continuity of Services rating (CoS). This is measured by four metrics which create an overall rating, with 1 being the highest risk and 4 being the lowest. WUTH is currently delivering a Cos of 2 which is in line with plans. WUTH is also forecasting to deliver a 2 for the end of the financial year. WUTH will be unable to score higher than a 2 on this rating due to the Trusts deficit position.
- The 2015/16 plan assumed delivery of £13m from the Cost improvement Programme (CIP). The latest forecast outturn position is that the Trust will deliver approx £11m of CIP. Opportunities are being sought to both fill the original gap and mitigate against shortfall. All potential savings are risk-rated to ensure that there is no impact to patient safety and experience.
- Some of the CIP will be delivered through increased income. Elective referrals are increasing 5% year on year. This additional demand brings additional income as a result of a payment by results contract; however this is also an additional burden to the health economy. Within the forecast CIP of £11m for 2015/16, it is anticipated that approx £7m will be achieved (after costs incurred) through additional income and £4m cost savings such as procurement and inflation avoidance.
- The aim of the savings is to cut out waste and deliver operational and clinical excellence. Therefore, there is a push on measures such as to safely reduce the length of stay in hospital by ensuring that there is the right treatment in the right place at the right time and to reduce the number of Did Not Attend (DNA) appointments. The Trust's Quality and Safety Committee review the potential impact of the savings programme to ensure any concerns are highlighted accordingly.
- As at month 5, the Trust has a strong cash position but this will obviously come under strain as a result of operating at a deficit. If a shortfall in cash does develop, there will be a necessity to borrow to support the revenue budget and this has been highlighted within the Trusts annual plan. Borrowing for the capital programme has previously taken place; but not the revenue budget. Members were informed that most Foundation Trusts are in deficit. However, the financial position of hospital trusts is becoming a system-wide issue for the NHS.

- Members were informed that there is increasing challenge to the way that the health system is funded through a formula of tariffs and the increasing demand and changing demographic of the population. The development of Vanguards is giving health economies the opportunity to look at innovative new ways of delivering healthcare.

Conclusion:

It was agreed that a further financial update report would be requested from WUTH for a future meeting of the Health & Care Performance Panel.

6.0 SOCIAL CARE ANNUAL COMPLAINTS AND CUSTOMER FEEDBACK REPORT - 2014/15

David Jones (Complaints Manager, Adult Social Services, Wirral Borough Council) provided an introduction to the Social Care Annual Complaints and Customer Feedback report. This report provides information about complaints, compliments and other feedback received by the Department of Adult Social Services for the period 1st April 2014 until 31st March 2015.

Highlights of the report included:

- The total number of complaints registered in 2014/15 was 345. Although this is only slightly higher than previous years it does continue the trend of increasing the number of complaints. The number of complaints has more than doubled since 2011/12.
- This year has seen a slight drop in the number of complaints about external providers. However, it does confirm a substantial increase of complaints in this area, both quantitatively and relatively. In 2011/12, 20% of complaints related to external providers; this figure is now 31%.
- Common themes among the complaints were:

Issues	Number
Late/Missed Visits (Dom Care)	35
Quality of Care (Dom Care)	20
Quality of Care (Residential)	16
Outcome of Assessment / Review	15
Invoices	15
Information about Charges	13

- There is a target to respond to 70% of complaints within 20 working days and an expectation that all complaints are fully responded to within 6 months. In 2014/15, 55% of complaints were responded to within 20 working days and 98% were fully responded to within 6 months.
- A number of learning points from the complaints process were detailed in the report, including a more robust monitoring of complaints. Training for managers regarding complaint handling has commenced.
- DASS has received 23 enquiries from the Local Government Ombudsman in 2014/15, compared to 19 in the previous year.

During discussion with members, a number of issues emerged:

- Clients can raise a complaint either with the Council (as commissioner of the service) or directly with the service provider. The data detailed in the report applied only to those complaints made directly to DASS. Therefore, it is possible that there are a significant number of other complaints, raised directly with the provider, of which DASS are unaware. Members noted their unease with this situation, in particular, the potential for the unknown number and seriousness of those complaints. It was confirmed that complaints can also be lodged separately with Healthwatch.
- Concern was expressed at the number of complaints relating to quality of care.
- It was commented that 20 days was a long time to allow for an initial response to be made to a complainant. Members were informed that the target is due to be amended to 15 days. It was pointed out that, in some cases, early action can prevent escalation into a more serious situation and that an initial acknowledgement should be sent within three days.
- Due to resource restrictions, complainants are not contacted at the end of the process to determine whether satisfaction of the complainant has been obtained.
- The Strategic Director for Families and Wellbeing commented that, with regard to the increase in the number of complaints, there was also an increase in other boroughs. In general, there is greater encouragement for people to make formal complaints, as well as there being more people in residential and nursing care.

Members requested that a further report be provided to the next meeting of the Health & Care Performance Panel regarding the process for the collecting and reporting of complaints data. It was also proposed that a separate report regarding the complaints process for Children's Social Services be presented to a future meeting of the Children Sub-Committee.

It was, additionally, suggested that it may be useful for the Panel to undertake future work relating to how the Council enables clients to raise a complaint.

7.0 FUTURE ARRANGEMENTS AND WORK PROGRAMME FOR THE PANEL

The next meeting of the Panel is scheduled for Wednesday 25th November. The agenda for that meeting will be discussed at a future meeting of the Chair and Spokespersons.

8.0 SUMMARY OF ACTIONS ARISING FROM THE MEETING

The following actions arose from the meeting:

1. Alan Veitch to ensure that a further financial update report from WUTH be included on the work programme for the Health & Care Performance Panel.
2. Clare Fish / Alan Veitch to arrange for a further report to be provided to the next meeting of the Health & Care Performance Panel regarding the process for the collecting and reporting of complaints data in adults social care.
3. Alan Veitch to request a report regarding the complaints process for children's social services be presented to a future meeting of the Children Sub-Committee.

9.0 RECOMMENDATIONS FOR APPROVAL BY THE FAMILIES AND WELLBEING POLICY & PERFORMANCE COMMITTEE

There were no specific recommendations to be made to the Families and Wellbeing Policy & Performance Committee.

REPORT AUTHOR: **Alan Veitch**
Scrutiny Support
0151 691 8564
email: alanveitch@wirral.gov.uk

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WIRRAL COUNCIL

POLICY AND PERFORMANCE FAMILIES AND WELLBEING COMMITTEE

1 DECEMBER 2015

SUBJECT:	<i>ALL AGE DISABILITY STRATEGY</i>
WARD/S AFFECTED:	<i>ALL</i>
REPORT OF:	<i>GRAHAM HODKINSON</i>
RESPONSIBLE PORTFOLIO HOLDER:	<i>CHRIS JONES</i>
KEY DECISION? <i>(Defined in paragraph 13.3 of Article 13 'Decision Making' in the Council's Constitution.)</i>	<i>YES/NO (delete as applicable)</i>

1.0 EXECUTIVE SUMMARY

- 1.1 This is to brief the Policy and Performance Families and Wellbeing Committee on the work that has been completed with regards to Wirral's All Age Disability Strategy.

Wirral have now written a draft All Age Disability strategy to ensure that the priorities of disabled people in Wirral are met; it has been developed through consultation and is ready to be shared for feedback.

The All Age Disability Strategy will be the overarching strategy which will have all strategies that have an impact on disabled people in Wirral will sit under.

2.0 BACKGROUND AND KEY ISSUES

- 2.1 There have been a number of consultation sessions with all stake holders to identify the key priorities for people with disabilities in Wirral. The 'draft' strategy is now ready to be shared with all of the individuals and groups of people who attended the consultation sessions, and it will also be sent to people who have autism, carers, Health and Social Care professionals, other departments in the Council, providers and the third sector.

DASS have led a joint piece of work between CYPD and CCG, looking at the whole age draft strategy and identified areas that are considered to be priorities for disabled people in Wirral.

3.0 RELEVANT RISKS

- 3.1

4.0 OTHER OPTIONS CONSIDERED

- 4.1

5.0 CONSULTATION

- 5.1 A number of consultation events were held in September and October 2015 with feedback sessions due to be held on 4th November 2015 so that the draft strategy can be shared and feedback can be received.

The consultation events and the feedback events have and will involve people with autism, family members and Carers, Health & Social Care professionals, other departments within the Council, providers and the third sector.

6.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

- 6.1 This strategy has implications for all members of the community, including the voluntary, community and faith sector.

7.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

- 7.1 There are some resources that need to be taken into consideration, they are:

There will need to be resources put into the Disability Partnership Board, this will be in member's time, admin resources for sending out information etc.

Financial implications – still to be determined

It has been requested that the document is printed in an easy read version so that it is accessible to all adults.

All departments within the Council will need to be involved with this Strategy as it is the responsibility of everyone to ensure that people in Wirral with disabilities have a 'Fulfilling and Rewarding Life'.

8.0 LEGAL IMPLICATIONS

- 8.1

9.0 EQUALITIES IMPLICATIONS

- 9.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

(a) Yes and impact review is attached –



EIA All Age Disability
Strategy.doc

10.0 CARBON REDUCTION IMPLICATIONS

10.1 (Carbon usage implications? Any other relevant environmental issues?)

11.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

11.1 (Is planning permission required?)

12.0 RECOMMENDATION/S

12.1

- 1) Agree the draft All Age Disability Strategy and sign off so that it can be implemented by the Disability Partnership Board.
- 2) Identify resources to ensure that the work can be completed and the strategy launched

13.0 REASON/S FOR RECOMMENDATION/S

13.1

REPORT AUTHOR: **Annamarie Jones**
Commissioning Lead
telephone: (0151666 5009)
email: annamariejones@wirral.gov.uk

APPENDICES

All Age Disability Strategy

REFERENCE MATERIAL

(Include background information referred to or relied upon when drafting this report, together with details of where the information can be found. There is no need to refer to publicly available material: e.g. Acts of Parliament or Government guidance.)

SUBJECT HISTORY (last 3 years)

Council Meeting	Date

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Wirral's All Age Disability Strategy:
People with Disabilities Living Independent
Lives

2016 – 2020

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Foreword

Wirral's All age Disability Strategy 2016 – 2020 has been developed jointly between Adult Social Services, Clinical Commissioning Group, Children's and Young Peoples Department, people with disabilities, Carers, providers and other professionals. It shows the objectives we have set out for ourselves and our partners as part of our commitment to improve the lives of people with disabilities, their Carers and their families.

Wirral Council have written a 5 year plan that will take the Council forward and will transform Wirral so that it becomes a place where people and businesses thrive. As part of this plan the Council are working with partners to develop the 20 pledges that have been identified to achieve these changes. One of the pledges identified is developing an 'All Age Disability Strategy: People with Disabilities Living Independently'.

The local All Age Disability Strategy: People with Disabilities Living Independently, will be the overarching strategy for people with disabilities in Wirral. This strategy sets out our vision, ambitions and commissioning intentions for disabled people for all ages in Wirral for the next four years. There will be additional strategies written and delivered which will sit underneath this strategy to meet the needs of individual groups of people, e.g. people with autism, people with sensory impairment, etc.

Insert diagram

This strategy is for all people in Wirral who have disabilities, there is an emphasis on people sustaining their own health and utilising their natural assets and having their needs met within the local community by family, friends and neighbours. The majority of people with disabilities will be able to have their needs met by accessing universal services that are available to all of the citizens in Wirral, we will work with the community to ensure that services, buildings etc are accessible to people with disabilities.

There are 320,914 people living in Wirral. There are a range of disabilities that are considered within this strategy. A breakdown of the number of people with these disabilities can be seen in Appendix 1.

Introduction

The aim of this strategy is to ensure that all disabled children, young people and adults are able to live healthy, full and fulfilling lives.

To achieve these ambitious aims, this strategy focuses on 9 Key Priority Outcomes:-

The best start in life: We will work with parents and carers to make sure that each child is safe, supported and cared for whilst being able to managed risks, develop a positive self-image and become physically healthy and emotionally resilient. We want to make sure that there is early help for parents with a disabled baby or toddler. We want to make sure the right help is available, for example good quality child care that is stimulating, safe and encourages development of early milestones.

Access to lifelong learning: Ensuring that education, lifelong learning and skills development is purposeful and results in meaningful opportunities for disabled people that enable them to take their place as full citizens.

Choice and control: Ensuring that disabled people of all ages are able to control the way in which they are supported to live fulfilling lives.

Community opportunities: Ensuring the people with disabilities have equal access to the whole range of universal services and community opportunities.

Good health: Improving health outcomes (both physical and emotional wellbeing) and reducing health inequalities for disabled people.

A strong voice for disabled people and their families: We will move from listening to disabled people and their families to valuing and supporting their right to be in charge of how their own support is planned and delivered.

Staying safe: We will enable all disabled people are able to live safer lives and the most vulnerable are protected.

Economic and employment wellbeing: We will work with jobcentre plus and local employers to ensure that there are a variety of opportunities available for disabled people to have a job.

Appropriate housing: We will work with housing providers to ensure that there is appropriate housing for people with disabilities.

Executive Summary

The purpose of this strategy is to make the following priority outcomes of Wirral a reality for disabled children, young people, adults and their families:

- Wirral is a place where disabled children, young people and adults can live safely – free from crime the causes of crime, and the fear of crime.
- Wirral's economy prospers and grows, together with the jobs, skills and qualifications and aspirations to support it in Wirral's communities, vulnerable people are able to live independent and safe lives, supported where this is required.
- Wirral's children and young people can get the best start in life and receive a good education so that they can make a positive contribution to their communities.
- Wirral is the place where people can live longer, healthier and fulfilling lives.
- Wirral's communities can access, enjoy and benefit from a range of learning, recreation and cultural activities.

We will ensure that high quality information, advice and guidance and universal support is available for **all** disabled people alongside everyone else. This will mean that disabled people live their lives as full citizens, with the right to shape and control their own support and to have their desires and needs met in the way they want.

We want to change the way that disabled people are labelled and we want to develop common language amongst professionals. We need to reduce confusion and misunderstanding between professionals and focus on common goals and outcomes.

We understand that **some** disabled people will have particular needs because their disabilities are complex or because their families are struggling with other issues alongside their child's disability. This may include issues around work, poverty, childcare, mental ill health etc. in these instances, we still want to ensure that disabled people are able to move away from being passive recipients of inflexible services and retain the right to personalised support that delivers the right solutions in the right place at the right time.

Our overarching priorities for the next four years for all disabled people are as follows:-

- The best start in life
- Lifelong learning
- Choice and control
- Community opportunities

- Good health
- A strong voice for disabled people and their families
- Staying safe
- Economic and employment well-being
- Appropriate housing

We think that trusting disabled people and their families to know what is best for them and enabling them to shape the help they need is the best way to make disabled people equal citizens in Wirral. Together we will deliver radical and positive change that ensures that disabled people and their families are in control of their care, support and education from birth to adulthood and old age. Where a person has disabilities that are so complex they are unable to communicate their wishes and needs, we will work with advocates, their families and other people who support them to make sure that they are able to make choices and reach their full potential.

Bringing together the responsibilities for all services that support disabled people provides a tremendous opportunity to harness expertise, energy and resources within Wirral, and deliver excellent outcomes for disabled children, young people and adults. We know that this agenda is much larger than Wirral Council and our strategy truly reflects the requirement for a whole Wirral approach, recognising the vital part that all partners and agencies play in actively sharing this vision.

We know that the current climate, in particular the national economic situation, has created challenges for us. We have acknowledged these pressures and have developed a strategy to deliver the outcomes that disabled people and their families tell us they want.

Our willingness to listen means that some of the changes that we make will be bold and transformational. We want disabled people in Wirral to see and feel speedy improvements. The 'People with Disabilities Living Independent Lives' Strategy defines our commitment to disabled children, young people and adults and highlights our intentions for the next four years.

Our Strategic Vision

Our Vision

We want to move the emphasis away from 'fitting people into services' towards empowering disabled people and their families to take control of the way in which they are supported in order to achieve their own goals and develop inner strength and resilience.

Our Approach

We will take a 'whole life' and 'whole family' approach by working in an integrated way with all partners to ensure we meet need in a joined up way, linked to an holistic assessment.

Our vision applies for all citizens who live in Wirral. Disabled people and their families are at the heart of this vision and it is our intention to make sure that disabled people have equal access to all community activities and buildings at the universal end of the spectrum that their non-disabled peers take for granted.

Our approach is outcome focused and emphasises the importance of accessing universal services – the services that are available to everyone e.g health, housing, schooling, further education, leisure. It places importance on the provision of high quality information, advice & guidance, prevention and early help with access to specialist services only where most needed. We know that people who feel in control of their own lives are less likely to feel dependent and are consequently more able to assert themselves and reduce the likelihood of vulnerability that results in abuse or poor care.

Commissioners will achieve change by working in partnership to deliver our priorities and better outcomes for disabled people. There are a number of principles that are important to us, we will:

- Hand over control and work with disabled people and their families to make sure that we develop strong, trusting relationships based on mutual respect and equal value.
- Commission an integrated, holistic assessment and person centred service for disabled children, young people and adults. This service will support people with complex disabilities to achieve their individual aspirations and goals by developing their own person centred plans
- Ensure disabled people get the support they need in their local community.
- Further promote the use of personal budgets (direct payments or managed payments) for everyone who is eligible for social care funded support.

- Work closely with disabled people, their families and providers to co-produce the possible solutions to achieve the outcomes that disabled people and their families want.
- Work in close partnership with organisations to shape the way in which the wide ranging opportunities and services they provide are fully accessible to disabled people.
- Work with schools, in particular special schools to make sure children and young people get the best education that prepares them for adulthood.
- Work with Early Years and Children's Centres to make sure that universal services are available to disabled children and their families.
- Ensure that disabled people feel safe and are protected from abuse, crime and neglect.
- Ensure that we take account of the difficult circumstances that disabled children can live in e.g. due to poverty.
- Develop integrated commissioning approaches for disabled people of all ages with CCGs and health trusts to make sure we are achieving good outcomes that meet local need.
- Focus on 'doing the right thing' and helping disabled people achieve good outcomes rather than whether we 'did it right' in terms of ticking boxes.
- Develop robust ways of understanding local need and then acting on this information
- Appoint a single lead commissioner who will be accountable for delivering this ambitious programme of change. This will ensure consistency, remove artificial 'age based' barriers, but will not dilute our focus on the high quality, age appropriate services which recognise the distinct needs of disabled children, young people and adults.
- Ensure the workforce that supports children and young people have the skills, expertise and information to work effectively.
- We will develop more joint, aligned and integrated commissioning with CCGs and other partner organisations to achieve better outcomes for disabled people.
- Ensure that people with disabilities are involved in the development of Information, Advice and Guidance services.

Who is this Strategy for?

A focus on the ALL and the FEW

All disabled people and their families will need access to high quality information and advice and universal services.

The **Majority** of disabled people will be able to have their needs met by accessing universal services that are accessible by everyone in the local community.

A few people will need specialist intervention through specialist or statutory services. Some disabled people with the most complex needs will always depend on others to help access the lives that the rest of us take for granted. It is our expectation that additional support is required, this will be delivered in the least intrusive way whilst meeting need, achieving better outcomes for disabled people and their families and providing good value for money.

We are aware that we still have some work to do to make sure that our information, advice and guidance is accessible and of a high quality. We will:

- Develop a system/service that supports disabled people, their families and carers and professionals to access high quality information, advice and guidance easily and quickly.
- Develop **what** to provide a whole life-whole family approach.

In order to develop the areas outlined above, we want to work with disabled people and their families to make sure that we know what is already working well, what needs improving and how we will measure whether we have made a difference.

Our Strategic Priorities

Priority 1

The Best Start in Life

We will ensure that all disabled infants and young children get the best possible start to their lives e.g. access quality early years support, childcare, educational provision; have access to appropriate health and advice maintain family relationships; develop friendships with their peers in their community and are included in mainstream activities,

Early help will be in place through high quality day care and early years opportunities for disabled children and their families.

Action to be taken:

Influencing Priorities

We will:

- Ensure 'play and stay' and other play opportunities are available locally.
- Ensure that playgrounds are inclusive.
- Ensure that public transport is inclusive and available.
- Be clear that it is everybody's business to make sure disabled children are protected from harm and feel safe.

Specific Commissioning Actions

We will:

- Identify disabled children early and ensure that children and families receive the right support at the right time.
- Ensure there is enough 'good' and 'outstanding' day-care available for disabled pre-school infants and children to enable parents who want to return to work and to enable children to develop and meet their milestones.
- Ensure the availability of short break provision.
- Identify those disabled children at risk of not achieving their potential and make sure they are supported to prevent this occurring.
- Ensure the families of young children with disabilities have access to advice, information and guidance to early help if needed to maximise their life chances.

- Work to ensure all the services we commission have a whole family and whole life approach so that disabled people's needs are met through a single inclusive, holistic approach.

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Priority 2

Lifelong learning

We will ensure that education; lifelong learning and skills development is purposeful and results in meaningful opportunities for those children and young people with SEND and who are vulnerable, as well as adults with disabilities. We will work in partnership with parents, carers, children and young people, early years settings, schools, colleges, employers, work based training providers, charities, etc to ensure that the priorities set out are delivered.

We will focus on early identification and support of children and young people to ensure that they receive effective and bespoke support at the earliest opportunity. Families will receive clear and comprehensive information about the services available to them within the 'Local Offer'. Children and young people who have SEND and who are vulnerable will have access to high quality:

- Assessment, plans, reviews and specialist interventions.
- Teaching which leads to children and young people making at least good and outstanding progress.
- Learning opportunities which excite, inspire and motivate.
- Seamless provision which enables children and young people to have a full range of opportunities that lead to a personalised pathway bespoke to their needs.
- Staff who are trained, skilled and knowledgeable in all aspects of learning, emotional, social, physical, sensory, communication and behavioural needs.
- Provision that is flexible, innovative, creative, accessible, quality assured and gives 'best value'.
- Advice and guidance throughout but particularly at the important times of transition from and within different settings as children and young people move into adulthood and employment.
- Education, health and care services that are working in an effective multi and transdisciplinary way planning together for children and young people and their families. This includes the effective sharing of data, predicting needs and jointly planning provision with common outcomes and language.

Actions to be taken:

Influencing Priorities

We will:

- Encourage education providers to improve local provision to cater for the differing types and degrees of learning, emotional, communication, sensory difficulty and/or disability focussing on progression throughout school and education to employment and independent living.
- Work with providers, partners and employers to consider innovative and collaborative approaches to increase the local provision offers for children and young people particularly with regards to work training, work experience placements and acquiring the skills and knowledge necessary to be able to gain employment.

Specific Commissioning Actions

We will:

- Ensure that children and young people who have SEND and who are vulnerable are identified early and holistic person centred plans are developed with their families from early years throughout their life.
- Work to improve the quality of information gathered about goals and needs, by those working with children and young people with SEND and who are vulnerable and use the information gathered to plan the type and amount of education specialised support, intervention and training provision required in future years.
- Consult with those involved to develop success and destination measures for post 16 education and training providers who deliver to learners with learning disabilities and/or difficulties in order to ensure that the effectiveness of provision can be evidenced.
- Show leadership, working in partnership to develop a range of local high quality education and training options focussing on progression to employment and independent living.
- Work in partnership to ensure children's health and care needs are met including respite and short break provision.
- Work in partnership with schools and local further education providers to put in place the necessary support so that children and young people with SEND and who are vulnerable have the choice to learn within their local community or close by wherever this is possible.
- Ensure that adult education is available to develop additional skills building upon how to take control/be heard – all organisations that support disabled people will sign up to this as an overarching priority,
- Ensure that children and young people are able to communicate what is important to them about their education and development opportunities and a wide creative high quality curriculum is developed as a result of this collaborative approach.

Priority 3

Choice and control

All people with disabilities have a right to live the lives that they want to, we will ensure that disabled people and their families are empowered and enabled to do this.

We know that many disabled people may need some support to enable them to achieve what they want to do in terms of their education, work, health, housing etc. some disabled people may need significant support to make decisions on their own behalf and will require support from Advocates, families and carers to make sure they can make choices and enjoy the best life they can.

We will support disabled people to improve their own lives by ensuring that they are in control of deciding how they are supported via Direct Payments and Personal Budgets, ensuring that they have equal access to all services and increasing the range of opportunities available.

We will commission services that support people to live in their communities, with access to 'early help' and 'simple solutions' that build resilience, prevent the loss of independence, and enable people to develop skills.

We will commission an 'all age' assessment, person centred planning and brokerage service to ensure that disabled people are able to aspire for and achieve their goals. This approach will significantly improve the experiences of children and young people as they grow into adulthood.

Action to be taken:

Influencing Priorities

We will:

- Increase the range of options across the lifespan available at a local and wider level.

Specific Commissioning Actions

We will:

- Continue to promote personal budgets/direct payments where people are eligible for paid support.

- Strengthen the range of early help options and ‘simple solutions’ whilst continuing to look at ways of preventing people entering crisis.
- Increase the numbers of people accessing personal budgets with the expectation that all disabled children, young people and adults who are eligible will have the opportunity for either a direct payment or managed budget.
- Commission seamless services that support disabled children, young people and adults to identify and achieve their aspirations and goals with a natural progression to adult life.
- Commission services that focus on access to universal services, prevention, early intervention and continue to develop high quality information that connects people to opportunities in their own communities.

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Priority 4

Community Opportunities

Disabled children, young people and adults and their families' say they want the opportunity to live, learn, work and play and have the same opportunities as their friends. We will work with partners to ensure that disabled people are able to access the whole range of opportunities available in their local communities.

This will mean that disabled children, young people and adults will have access to a wide range of community and leisure opportunities which enable them to make friends, have fun and pursue their interests.

There will be an increase in the number and type of opportunities for paid employment, voluntary work, apprenticeships and work experience.

Action to be taken:

Influencing Priorities

We will:

- Work in partnership with all stakeholders to ensure that disabled people are able to access a range of opportunities that are available to everyone.
- Ensure that disabled people are able to participate in a wide range of leisure activities, and commission innovative services that focus on prevention, early intervention and breaking down barriers and connecting people to opportunities
- Ensure that those people with the greatest needs are able to access their community and support them to source activities and options in line with their aspirations.
- Identify opportunities for increasing employment opportunities by building this as a priority requirement as part of the procurement of future services, and work in partnership with colleagues to identify the potential incentivising the provision of more opportunities for disabled people in mainstream employment.
- Work with the private and voluntary sector to increase places for disabled children in clubs and leisure activities such as uniformed organisations, sports clubs and special interest groups.

Specific Commissioning Actions

We will:

- Commission short breaks for children, young people and adults that are designed to give them a break and contribute to meeting their outcomes through personal development, life experiences and having fun.
- Explore opportunities for groups of friends to 'pool' their personal budgets to enable them to take part in activities, hobbies and leisure opportunities together.
- Commission a wide range of high quality alternatives to residential and day care centres and improve facilities available in the community to enable disabled people to become full citizens.
- Work with Jobcentre plus to ensure that there are employment opportunities available to disabled people of all ages.

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Priority 5

Good health

Good health is important to everyone. For those people who have more complex needs it is vital that their needs are met in a way that enables them to fully participate in every aspect of their lives, especially where this enables children with complex needs to achieve their educational aspirations.

It has been highlighted that people with learning disabilities, in particular, experience significant health inequalities. We will work with Clinical Commissioning Group, Public Health and NHS providers to deliver improved outcomes.

Our commitment is that children, young people and adults with disabilities have equal access to health services, with prompt support from high quality specialist services where required.

Action to be taken:

Influencing Priorities

We will:

- Work with the CCG to ensure that there is a comprehensive range of mainstream and specialist health services available to sustain and support people in their local community, avoiding unnecessary admissions to hospital.
- Work with the CCG and Public Health to ensure that universal primary health care support service for people with learning disabilities is timely and effective.

Specific Commissioning Actions

We will:

- Ensure each child, young person and adult with complex needs has an identified person who is able to coordinate and ensure early intervention to meet their physical health care needs.
- Recognise and provide support to disabled children, young people and adults to maintain good emotional health and wellbeing alongside specialist help when they have a mental illness.
- Ensure that services for children with autistic spectrum conditions and attention deficit hyperactivity disorder are available and that support remains consistent when they become adults.

- Provide an Integrated Disability Team to work with disabled people with the most complex needs.
- Ensure integrated working between community learning disability health staff and social care staff to ensure better relationships.
- Ensure disabled children, young people and adults receive prompt access to assistive technology services and equipment.
- Listen to disabled people and their families and work with them around their health priorities including sexual health and relationships.

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Priority 6

A strong voice for disabled people and their families

We will move from listening to disabled people and their families to valuing and supporting their right to be in charge of how their own support is planned and delivered.

This will mean that disabled people and their families will be in charge of their own support and have a strong voice in how things are delivered locally. Disabled children, young people and adults will be supported by advocacy organisations to 'speak up' and make choices about their lives.

Action to be taken:

Influencing Priorities

We will:

- Ensure that disabled people are able to develop and run user-led organisations.
- Develop high quality information, advice and guidance that supports disabled people and their families to make informed decisions is easily accessible.
- Ensure equal access to universal services and commission services that empower disabled people to take action and support them to make a difference.
- Work in partnership with disabled people and their parents and carers to ensure that they play a key role in influencing the planning, commissioning and delivery of services.

Specific Commissioning Actions

We will:

- Ensure that disabled people and their families are in control of their own support.
- Strengthen self-advocacy to ensure that disabled people have a strong voice in how services are developed and delivered locally.
- Ensure that non family carers, such as foster carers are supported.
- Promote the use of personal budgets – including the opportunity for friends to 'pool' their resources.
- Recognise the role of young carers and prioritise the need to offer support to enable them to have a childhood.

- Develop an infrastructure to support people to identify and achieve their outcomes and for a developed market of real choice and alternatives.

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Priority 7

Staying safe

We will enable all disabled people to live safer lives and will protect the most vulnerable. Disabled people will weigh up and manage risk and make their own decisions about the actions they wish to take where this is possible. Staying safe encompasses a variety of areas including personal safety, safety in the home, safety from road traffic accidents, safeguarding from abuse and neglect and the impact of hidden harm where a parent or carer is misusing alcohol or drugs. We also know that young carers and adult carers are in need of support in their own right to ensure that their needs are met and a separate strategy is in place for them.

It is important that we consider the needs of all disabled people to be safe in all areas of life. We know that it is important to have a balance between keeping people safe and making sure they have opportunities to take considered risks and to grow and develop.

We know that children, young people and adults with disabilities are more vulnerable than the general population. Some are more likely to suffer abuse and neglect, as well as be bullied and suffer hate crime. By supporting disabled people to be more active in their community, this will reduce stigma and enhance opportunities for disabled people.

Action to be taken:

Influencing Priorities

We will:

- Create and seize opportunities to develop preventative initiatives through greater partnership working with disabled people, families and partners which help to raise awareness and achieve positive results to ensure that disabled people feel safe at home and in the wider community.
- Work with partners to ensure safe and effective roads and transport systems that encourage disabled people to be able to safely use the roads and public transport independently.

Specific Commissioning Actions

We will:

- Ensure that all disabled people are protected from abuse, neglect and crime.

- Ensure that the right support is available at the right time in the right place for all, including the most vulnerable.
- Ensure early intervention in families where a child is at risk.
- Adopt a multi-agency approach so that families do not have to tell their story over and over again.
- Improve systems to avoid problems with transition between services on the basis of our silo areas, such as 'health', 'education', 'childhood' and 'adulthood'.
- Ensure the development of resilience and self-esteem to enable disabled people to make the right choices.

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Priority 8

Economic and employment well-being

People with disabilities have the right and want to have the same opportunities to work as other citizens in the community. They want support to get a job, keep it and then to progress in work, this is the best route out of poverty, and a central part of social inclusion. People with Learning Disabilities are significantly under-represented in the labour market and we are committed to doing more to help all disabled people into work.

To make sure that this happens, we need to ensure that the assessment and care planning process for disabled people's needs for care and support considers participation in employment as a key outcome, if appropriate. It will need to look at the ways that any such needs can be met in a way which can support people with disabilities to become work ready and join the workforce.

Action to be taken:

Influencing Priorities

We will:

- Have a focus within annual reviews for young people in schools on volunteering, especially from year 9
- Work with partners to offer a wider range of employment opportunities
- Develop new approaches that will support people with disabilities into employment

Specific Commissioning Actions

We will:

- Scope and engage in wider employment initiatives where available ensuring awareness of legal obligations and to link in with Department of Work and Pensions.
- Ensure that Support Plans are person centred and include employment issues for people with disabilities.
- Develop and maintain well supported transitional arrangements to/within work.
- To engage with local employers specifically regarding the employment of people with disabilities which will include sustaining a work placement.
- Ensure that appropriate support is provided to obtain and maintain volunteer and employment opportunities within the Wirral, including making use of

Disability Employment Advisors, using the Access to Work scheme where appropriate and job coaches.

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Priority 9

Appropriate housing

People with Disabilities Living Independent Lives is aimed at ensuring that disabled people and their families have real choice and control over the way they live their lives. However, for some disabled people the range of opportunities have been limited. The actions set out in this strategy are aimed at reversing this.

This will mean that all disabled people will have more choices, including the opportunity to live as tenants in their own homes.

Disabled people will be able to choose from the whole range of accommodation and support is options, from 'mainstream' housing to transitional accommodation that allows people to develop independent living skills.

This will link to the Housing Strategy.

Action to be taken:

Influencing Priorities

We will:

- Increase the range of housing options available for people with learning disabilities. This will include over ** units of new accommodation.
- Encourage young adults to envisage independence from their parents as a possibility.

Specific Commissioning Actions

We will:

- Reduce the dependence on residential and nursing homes and increase the availability of extra care and supported living options.
- Ensure that disabled people with complex needs and challenging behaviour are considered alongside their peers; both in terms of short term preventative support, a range of community based options and longer term accommodation and support. We will work in partnership with health colleagues to commission community based services that support people with challenging behaviour in their own homes in order to manage crises and prevent breakdown, and reduce the incidence of emergency/crisis placements.

- Continue to promote the use of assistive technology to increase people's independence, dignity and choice while helping to reduce direct input from parents, carers or support workers.

DRAFT

Next Steps

Wirral Council commits a significant amount of resources to meet the needs of disabled children, young people and adults, their families and carers. This strategy seeks to ensure that these resources are deployed to maximum effect – to deliver positive outcomes for people while optimising value for money. Wirral's approach is to work with citizens and partners across every local community to deliver better opportunities for disabled children, young people and adults.

We want to move resources from residential and building based provision to more innovative community based alternatives that promote genuine choice, independence and high quality personalised outcomes.

We recognise that disabled people will need help at different points in their lives and we will ensure that the relevant information, advice and guidance and early help is available when they need it. We will put the disabled people at the centre of our strategy and set out a clear and consistent vision, with outcomes that will enable each disabled child, young person and adult to live a full, healthy and independent life.

The All Age Disability Strategy will be implemented and overseen by the All Age Disability Partnership Board.

WIRRAL COUNCIL

CABINET

5 November 2015

SUBJECT:	DAY SERVICES LOCAL AUTHORITY COMPANY (LAC) WIRRAL EVOLUTIONS - UPDATE
WARD/S AFFECTED:	ALL
REPORT OF:	DIRECTOR OF ADULT SOCIAL SERVICES
RESPONSIBLE PORTFOLIO HOLDER:	COUNCILLOR CHRISTINE JONES, ADULT SOCIAL CARE AND PUBLIC HEALTH
KEY DECISION?	YES

1 EXECUTIVE SUMMARY

- 1.1 Wirral Evolutions is a new Local Authority Trading Company. Cabinet originally agreed to the development on 19 March 2014 as a response to shrinking resources, and concerns about the sustainability of day services for people with Disabilities. Services were down sized to increase efficiency and reduce costs. There was however, a strong user and carer voice that these services were very highly valued and that they could contribute to both the design and running of an alternative more cost effective model.
- 1.2 The service links strongly to the following Wirral Plan Pledges; enabling people with disabilities to live independently, realising the personal assets that people with disabilities have and working directly with them to release their full potential. Greater job opportunities for Wirral, Wirral Evolutions have based their business plan on growth which will increase employment opportunities, "Best Bites" and other employment schemes enable people to develop the skills that they need to get into employment rather than care.
- 1.3 This report brings together progress in relation to creating Wirral Evolutions. It covers the formal arrangements and key documents that have been developed in order for the company to effectively operate, and for the commissioner (DASS) to move from direct provider to a client of the service.
- 1.4 There have been challenges and changes relating to the original financial assumptions that were taken into account by cabinet in 2014. These are covered in the report to provide a contemporary view. The 5 year formal Business Plan, developed by the company is a key document that sets out confirmation of the companies plan for viability, sustainability and growth. *It has been subject to review and challenge from the Council client side and Section 151 Officer. A copy of this can be found at Appendix 1 of the report (exempt).

1.5 Cabinet are asked to note the progress made, to support the approach taken to business planning, and the formal transfer and company start date of 1 December 2015.

1.6 Exempt Information

This report contains **exempt** information at Appendix 1 as defined in Schedule 12A of the Local Government Act 1972. It is in the public interest to exclude the press and public under **Paragraph 3** *'Information relating to the financial or business affairs of any particular person (including the authority holding the information'* the information contained in the appendix is commercially sensitive.

2 BACKGROUND AND KEY ISSUES

Progress to date

2.1 Following Cabinet approval in 2014, an Internal Challenge process and an Independent Review of the Strategic Business Case were undertaken. The outcome of the Internal Challenge was that the model was approved by the Cabinet Portfolio Holder for Governance, Commissioning and Improvement and the Chief Executive.

- The company was developed as the most viable option because it could achieve savings and generate income from other sources such as direct payments, private funders and potentially other contracts from outside of the Council. This will help drive services to become more commercial and more efficient
- Has the potential to provide leadership in a relatively disparate market which could help to manage quality issues in the external market. This ensures that the Council can continue to meet its legal obligations in the event of market failures.

2.2 In April 2015 an independent review was carried out by Capita who were commissioned by the Strategic Director for Transformation & Resources and Head of Legal Services. The final report from Capita was accepted by the Strategic Leadership team as confirmation of the feasibility and sustainability of the business case and concluded the following:

'This is now a robust decision making document, because it demonstrates where you have derived evidence and includes sufficient metrics to make the case for the establishment of next steps in your journey. It also makes clear that there are areas of work to be developed before the company can become fully fledged, which I know you had already recognised and were building a programme of work to deliver'

2.3 In September 2015 the contract value was established to cover the core cost of company operation. This has enabled the company to establish a profit and loss account, which forms a vital part of the 5 year business plan. A service contract agreement for the provision of day services has been developed (Appendix 3) the remainder of planned efficiencies as well as to set out key expectations in relation to how the company will deliver the service on behalf of Adult Social Care

2.4 The Company was registered with companies house on 15 May 2015 and will be subject to an annual audit of its accounts. The Articles of Association sets out the board and key appointments;

- The Board of Directors includes two Executive Directors a chair and two Non-Executive Directors
- Executive Directors - Company Director (Christine Beyga) and Finance Director (Sandra Thomas), both secondments from DASS.
- Chair (Carey Bamber)
- None Executive Directors (Mike Naden) independent businessman, and (Councillor Phil Davies)

The first formal statutory board meeting took place on Friday 19 May, as required this confirmed Articles of Association, incorporation, appointment of statutory directors etc

2.5 **Project Implementation Board and Workstreams**

A Project Implementation Board has been in place and active since 14 January 2014. This has cross Council attendance and participation including Trade Unions. Four workstreams report into the project board, these are:

- HR (including pensions)
- ICT
- Finance
- Asset Management

Status reports generated for each board meeting which are then fed into DASS SLT meetings and SSG meetings. The board has achieved the following outcomes:

- Developed robust leasing arrangements and contracts in relation to buildings and premises that will be used by the company
- Formulated arrangements for the TUPE transfer of 145 staff from the Council into Wirral Evolutions
- Supported Wirral Evolutions to develop new independent financial systems
- Supported Wirral Evolutions to identify and implement an ICT infrastructure suitable to meet the needs of a small to medium sized enterprise
- Developed support services specifications for Finance, Legal, HR and IT services and identified future requirements and 'buy back' requirements of the company

The Project Implementation Board will continue to meet post transfer to oversee the remaining transition arrangements; it will cease to meet after December 2015.

2.6 Shareholder Scrutiny Group

Has been established and meeting monthly, membership is as follows:

- Strategic Director Transformation and resources (Chair);
- Strategic Director families and Wellbeing
- Portfolio Holder
- Section 151 Officer
- Director of Adult Services
- Council's Monitoring Officer
- Strategic Commissioner/Director of Public Health
- Two Parent/Carer representatives

Terms of reference were established and agreed. The Shareholder Scrutiny Group (SSG) will operate across phases to do the following:

- To oversee the establishment of the LAC (April to December 2015)
- To provide overview and scrutiny of the company as the sole shareholder (from December 2015 – March 2019)

At the end of this period The SSG will cease to function and the Council will move into a commissioning and partnership agreement/function with the company.

2.7 Council/Client Implementation Group

A 'Council side' implementation group was formed to progress practical arrangements from the client side perspective. This is chaired by the Director of Adult Social Services and included officers from finance, legal services, HR and change team.

2.7.1 Purpose and Function

- To maintain a clear grip on the development of the Local Authority Company
- To represent and protect the Council's interests
- To take day-to-day decisions in relation to support and resources for the company
- To develop proposals and recommendations for further decisions making by either Benefits Realisation Group or Shareholder Scrutiny Group as appropriate
- To develop and embed an effective client function

2.7.2 Key responsibilities

- Review and challenge proposals developed by the company in relation to the business plan and operating model.
- Secure resources required to implement the Local Authority Company
- Review and challenge how risks are identified, defined, evaluated and managed, including the plausibility of mitigating actions.
- Strengthen accountability for use of resources across the Local Authority Company.

2.8 Management Posts (Secondments)

The task of setting up of a Local Authority Company (LAC) for Day Services and Daytime Opportunities was a new and innovative change of direction for the Council. A dedicated management team was put in place this included seconding an Acting Managing Director and Acting Head of Finance. These roles were key to the success of the initial setting up of the company, ensuring it is fit for purpose and offers a sustainable business model.

Both roles were appointed to on a temporary basis from 7 April 2015. Wirral Evolutions Board will consider longer term arrangements post transfer with a focus on what the company's requirements are from 2016 onwards.

2.9 Marketing and branding

Work was commenced earlier this year to develop a brand identity for Wirral Evolutions, working closely with the Codesign reference groups and the staff group. Social Media channels are now well developed using Twitter, Facebook and LinkedIn. All social media channels are functioning and performing well with a growing following. The Company website is in production and will go live in late November. In addition the company will be working to a marketing plan and associated growth strategy to develop the business going forward. Historically the services available have never been publicised or marketed as there has not been an impetus to extend the customer base outside of those in receipt of Council funding. The business plan is predicated on such growth in order to achieve a sustainable model going forward

2.10 Workforce Development

Wirral Evolutions has a commitment to all staff; the Wirral Evolutions Employee Charter clearly states the commitment to its workforce as an ethical employer (see Appendix 2 of this report) The charter sets out the commitment to the living wage, access to pensions, staff representation and reasonable terms and conditions. In addition the company is committed to an apprenticeship scheme which will provide employment opportunities for local people including people with disabilities currently accessing services to provide them with an employment pathway previously not available to them.

In addition Wirral Evolutions is currently in the process of becoming an accredited Living Wage Service Provider through the Living Wage Foundation; this is a national recognition and benchmark showing best practice in employment.

2.11 Development of Centre's of Excellence

The Council's capital programme has an amount of £615,000 for the transformation of day Services. In addition £1.2M has been set aside in the 2016-17 programme in order to improve and extend facilities at the Pensby Wood Centre. Pensby currently provides services for people with profound and multiple disabilities. This grant will enable increased capacity for high quality services and a broader more integrated offer at Pensby. Planned improvements include an upgraded hydrotherapy pool/spa therapeutic facility, extension and enhancement of existing facilities including a large conservatory and access to a sensory garden and improved outside area to provide more physical activities.

Other recent improvements and investments made by the Council to improve people's experience of support include:

- Extensive improvements at Eastham Centre including a new roof, kitchen and windows
- Development of a brand new service at Oakenholt to provide a touch base service in the Moreton Community enabling the old building to be demolished and the site cleared.
- Extension of facilities at Dale Farm and Royden Park to provide outside classrooms to enable greater engagement and access

3.0 RELEVANT RISKS

3.1 The company business plan identifies key risks and strategies to manage risk including an exit strategy and business continuity plans. Risks include:

- **Appropriate and proportionate funding for services from Council at a time when available resources are reducing**
- The Business Plan reflects the outstanding efficiency reduction of £500,000 and assumes the current contract funding will continue over the life of the plan. In addition, future profitability of the company will secure further cost reductions for the Council. Significant changes from this position may impact on viability and the anticipation of Council funded growth of £1.2m over the life of the contract remains high risk.
- **The ability of the company to attract new customers and access markets.**
- The Company strategy is to become sustainable through growth, to expand into new markets and to ensure that the business offer is flexible enough to broaden the range of customers. The Business Plan (appendix 1) (**exempt**) is a key document setting out the relevant markets to be exploited, expected growth levels and assumptions in relation to new business and income. The plan shows analysis of the market and trends, together with an outline of how growth is expected to be achieved, based on demand through demographic change and new market opportunities. Whilst the potential income from expansion into new markets is not included in the Business Plan it does anticipate growth through self-funders and other users of £1m over 5 years. The risks associated with this cornerstone of the plan mean that growth must be actively promoted and kept closely under review.

3.2 Market competition and alternative provision.

The market is relatively fragmented and there are few alternative providers. The customer base has remained relatively consistent with ongoing annual new demand for provision. The block service contract agreement (appendix 3) reflects the Commissioners commitment to the budget for the next three years which gives the company opportunity to develop its offer and to begin to compete with the sector on a more equal basis. This approach reduces risks giving a predictable contract value for 3 years.

3.3 Increased costs as a result of the National Living Wage and pension arrangements for staff.

The Living Wage has already been implemented by the Council, whilst this is an issue that is being considered by all care sectors, the changes are not thought likely to distort the business plan in the short term. Proposals for dealing with additional pension costs are dealt with later in this report.

4.0 OTHER OPTIONS CONSIDERED

4.1 Previous reports to Cabinet have identified and completed full options appraisals, concluding that the LAC model was the most appropriate and proportionate response given that Wirral Council, like other Councils, faces the challenge of ensuring the quality of adult social care provision amid increasing and more complex demand and severe financial constraints. There are a number of reasons why the current model of service delivery for the services within scope is not an option. These are listed and briefly outlined below:

- Demographic pressures means that services cannot stay the same
- Financial constraints means these services have high MTP commitments
- The Company model enables new markets to be exploited outside of the requirements of adult social care the new delivery model offers greater scope than direct service provision through adults.

5.0 CONSULTATION

5.1 Staff, carers and people that use services have been very closely involved in service design through a staff forum focussed on innovation in practice. A co-design reference group made up of users and carers is closely involved in agreeing future direction and key aspects of service provision that they see as critical.

5.2 Formal Consultation has been undertaken with all staff and Trade Unions in relation to the company model and the TUPE transfer and will continue.

5.3 Wirral Evolutions will recognise Trade Unions.

6.0 OUTSTANDING PREVIOUSLY APPROVED ACTIONS

6.1 None arising as a direct result of this report.

7.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

7.1 No negative impacts arising as a direct result of this report.

8.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

8.1 Following the decision to create the company, the acting Managing Director and Acting Director of Finance have led the development of a business plan

8.2 Business Plan

The business plan demonstrates a viable business going forward with anticipated turnover of £5.5m growing to £7m over a 5 year period. There are some material updates to assumptions since the original Business Case was drafted including a revised staffing structure, contract efficiencies and assumptions about growth in income. The changes that have been incorporated into the business plan are being brought back to Cabinet for final approval.

8.3 The following table provides a high level comparison between the original financial projections in the Business Case and those now presented in the Business Plan

Retained Profit/(Loss)	Year 1 £	Year 2 £	Year 3 £	Year 4 £	Year 5 £
Original Business Case – September 2014	21,611	241,261	489,954	N/A	N/A
Business Plan – October 2015	(256,600)	(113,400)	60,200	193,800	325,600

8.4 The key points from this financial analysis are:
- Evolutions are expected to be profitable and to break even by its 3rd year
- The surpluses generated have reduced to reflect revised estimates of the company's costs base and income growth but still show a positive return by year 3.

The main changes from the original Business Case are:

- Revised staffing costs and structures
- Changes in Pensions, National Insurance and pay awards
- Revised assumptions about Support Service costs and savings
- The exclusion of service user transport
- Revised / increased income projections
- Changes in the operation of some services since the business case
- The inclusion of cash flow and pension bond costs

8.5 **Cash Flow**

As is common with new Council owned companies Evolutions will require support from the Council in the form of a loan / overdraft arrangement to underpin its cash flow over its early years. At present it is anticipated that the overdraft / loan could be up to £300k in the second year, decreasing over the remaining life of the Business Plan. The company will be charged a commercial interest rate for this facility, which is reflected in the Business Plan.

8.6 **Support Services**

Existing Council services operate on a full cost recovery basis, parts of which are in support of Day Services. The creation of Evolutions exposes the Council to a potential cost unless this contribution is maintained by the company. In response to this Evolutions have agreed to continue to buy back support services (currently £458,400) for a period of 3 to 5 years. The services provided form part of a service contract agreement for Finance, Legal, HR, IT support. The current value of this support has been reflected in the service contract. As the company develops and may choose to purchase support services from the market rather than the Council, but this will be a business decision made by Wirral Evolutions going forward in partnership with the Council.

8.7 **Budget provision / Contract value**

In 2012, in anticipation of developing a new delivery vehicle for day services an overall saving of £2m was agreed for day services, this was a predicated on a model of downsizing and reduction. The model has been revisited, revised and modified but in summary the following performance has been achieved over the last three years:

- **£1.5m** budget efficiencies over last 3 years (2013/14, 2014/15, 2015/16)
- Total budget reduction of **28%** over last 3 years (£7.6m to £5.5m)
- **30%** reduction in workforce (full time equivalent) from 179.6 fte to 126.2 fte

8.8 Of the original £2m saving target, £500K is still to be achieved through day service savings. It has not been possible to make this in 2015, the saving has therefore slipped into 2016. The contract value reduces in 2016 by 500K in order to ensure that the company carries forward the requirement to deliver this efficiency as set out in the table below.

In year 1 2016-17 the contract value is £4,635,800.

8.9 **Anticipated contract growth**

Over the life of the business plan it is anticipated that demands on the services provided will continue to increase annually. The business plan includes an expectation of additional demand for placements by the Council for service users that by 2020-21 totals an additional £1.2m. This additional pressure will be reflected in financial planning decisions for the Adult Social Care budget within the Council's Medium Term Financial Plan.

- 8.10 The company has incurred start-up costs including staff costs funded by DASS to be funded through the Transformation Fund of £250,000.
- 8.11 **Pensions**
The Company's pension arrangements are based on a fully funded transfer (where deficits on previous pensionable service for employees transferring to the company will remain with the Council.)
- 8.12 Information from the Merseyside Pension Fund's actuary indicate that the transfer will increase pension contributions rate from 13.6% to 17.2% if the scheme remains open, or 20.2% if the scheme is closed. The rates are based on the actuary' assessment of staff transferring into the company and the recent and future levels anticipated for investment performance. Overall the additional costs are £132,000 pa for an open scheme and £177,000 pa if the scheme is closed.
- 8.13 A formal admission agreement for the company will be drawn up with MPF. The Council will be required to guarantee any potential unfunded liabilities for deferred benefits or early retirement strain costs, for which the company will pay the equivalent of a commercial bond rte.
- 8.14 A possibility that was considered was to pool the company's pension rate with the Councils. This would give the company the advantage of a lower initial cost. However whilst these are the pension costs for staff who are currently included within Wirral this option is not recommended. The rate is significantly below the rate determined by the actuary and therefore would be seen as an unfair and anti-competitive subsidy.
- 8.15 The option that is recommended is to close the local government pension scheme to new employees. This is initially a more expensive proposal; however over time as the workforce changes costs will reduce bringing the company's pension arrangements more in line with the external market.
- 8.16 New employees will be placed in a Qualifying Workplace Pension Scheme, with contributions both from the employer and the employee. The scheme will meet all minimum statutory requirements for a workplace pension. Being less costly to the employer it will reduce future liabilities both for the company and the Council. However this is also reflected in the final pension benefit package for staff. Overall company pension costs will increase by £177,000 in year 1 and this will be reflected in the contract with Evolutions. Previous budget assumptions for the Council anticipated that workforce pension costs will increase from 2017-18, this brings forward part of that change into next year's budget, where an appropriate provision will need to be made.

9.0 LEGAL IMPLICATIONS

The European rules prohibiting state aid to the company will not apply to the extent that the company is only competing for local business and with competitors based in the UK and not in other European countries. UK legislation prohibits local authorities from subsidising the costs incurred by companies which they control. The company will also be subject to the equal pay legislation as it will be associated with the Council by virtue of the latter's control and its employees will be able to choose as comparators employees of the opposite sex employed by the Council in appropriate cases.

9.1 TUPE

TUPE applies in two sets of circumstances:

- i. When there is the transfer from one organisation to another of an economic entity that retains its identity. An economic entity is defined as “an organised grouping of resources which has the objective of pursuing an economic activity, whether or not that activity is central or ancillary”;

and / or

- ii. Where a specific employee or dedicated group of employees provide a service to a client, and the identity of the service provider changes. The change in service provider may be from 'in house' to a third party provider (which may include another public sector body); from one third party provider to another; or from a third party provider back 'in house'.

9.2 TUPE generally applies where a public authority outsources its service delivery, provided the conditions set out in paragraph 2 above are satisfied. As there is a dedicated group of employees working on the activities to be outsourced then TUPE will apply.

9.3 As pension rights that relate to old age, health or survivors do not transfer under TUPE, the Best Value Authorities Staff Transfer (Pension) Direction 2007 compels the local authority to ensure the contract with the new service provider requires that each transferring employee has rights to acquire pension rights that are the same as those prior to transfer.

9.4 The Operational and legal process for Wirral Evolution to gain admittance to Merseyside Pension Fund to participate in the LGPS is in progress in compliance with this statutory requirement.

9.5 Growth assumptions have been made on the basis of the company remaining Teckal compliant, initially the service contract agreement is in the form of a block contract with the company moving onto the standard day service framework after 3 years.

9.6 Agreement has been reached for the lease of assets and buildings. A service contract agreement is in place for all repairs and maintenance.

10.0 EQUALITIES IMPLICATIONS

10.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

(a) Yes and previous impact review is attached.

11.0 CARBON REDUCTION AND ENVIRONMENTAL IMPLICATIONS

11.1 None identified.

12.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

12.1 None identified.

13.0 RECOMMENDATIONS

13.1 It is requested that Cabinet:

- a) Note the contents of this report and acknowledge the progress made by officers to develop and establish Wirral Evolutions as a sustainable and viable alternative delivery model for services previously provided directly by the Council.
- b) Approve the Business Plan of Wirral Evolutions
- c) Approve the contractual position set out in the service contract agreement
- d) Approve staff transfer into Wirral Evolutions and company start date of 1 December 2015.
- e) Agree to receive further annual reports to the Council as shareholder of the company
- f) Agree the decision regarding pensions, delegating final arrangements to the Section 151 Officer
- g) Support the use of the re-modelling reserve to meet set up costs

14.0 REASON/S FOR RECOMMENDATION/S

14.1 Cabinet is requested to support the recommendations of this report in order to achieve a solution that is mutually supportive and acceptable to both the Council and the company and that will provide a future sustainable delivery model for day services.

REPORT AUTHOR: Name: Graham Hodkinson
Designation: Director of Adult Social Services
telephone (0151) 666 3650
email grahamhodkinson@wirral.gov.uk

APPENDICES

Appendix 1 – Wirral Evolutions 5 Year Business Plan (**Exempt**)

Appendix 2 – Wirral Evolutions Employee Charter

Appendix 3 – Service Contract Agreement

BACKGROUND PAPERS/REFERENCE MATERIAL

BRIEFING NOTES HISTORY

Briefing Note	Date
N/A	

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Cabinet	20 December 2012
Health & Wellbeing Overview & Scrutiny Committee	4 December 2012
Health & Wellbeing Overview & Scrutiny Committee	14 January 2013
Cabinet	18 February 2013
Council (Budget)	5 March 2013
Cabinet	10 December 2013
Cabinet	13 March 2014
Cabinet	19 June 2014

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Wirral Evolutions Employer/Employee Charter

As an ethical employer, Wirral Evolutions (WE) aspires to work together to provide an environment that encourages people to take pride in what they do and to be inspired to improve the lives of people they work with and for.

The WE staff charter

The WE charter expresses our organisational values. The charter describes what the WE commits to as an organisation, and what is expected of staff to make sure we meet this organisational commitment.

The WE values are embedded within the WE competency framework, which outlines the behaviours that are essential for effective performance in our organisation. The framework forms the basis of our people management processes (recruitment and selection, performance management and development) and provides a common language for how we go about our daily work.

Staff commit to:

Leadership and accountability:

- Focusing on delivering the best possible outcomes and value for money for people at all times.
- Striving to improve their own performance and suggesting improvements for team and organisational performance.
- Giving constructive feedback, engaging fully with organisational development and taking responsibility for their actions.

Collaboration:

- Collaborating with colleagues, working efficiently and flexibly to cut out duplication and share knowledge.
- Being open to giving and receiving constructive feedback and thanking colleagues for their contribution.
- Being responsive, efficient and polite when dealing with colleagues, partners and stakeholders to build trust in the organisation

Fairness and integrity:

- Treating everyone with professional and personal respect, promoting fairness and recognising the value of diversity.
- Showing integrity through honesty, ethical behaviour and open communication.
- Challenging inefficient processes and inappropriate behaviours which act as barriers to improvement.

WE commits to:**Leadership and accountability:**

- Providing a clear strategic vision and priorities supported by a strong, inspiring leadership team.
- Being an organisation that empowers and develops staff, maximising talent, skills and experience.
- Managers leading by example, celebrating successes, recognising everybody's roles and contributions, and addressing underperformance.

Collaboration:

- Consulting and informing staff, families and other stakeholders about WE priorities and plans, with clarity about what is expected of staff in delivering them.
- Clear lines of accountability and responsibility.
- An open and constructive joint working relationship with elected politicians and political appointees.

Fairness and integrity:

- Working to build trust both internally and with partners and stakeholders.
- Communicating in an open, transparent and honest way with staff, partners and stakeholders.
- Respecting and considering the diverse needs of all staff and ensuring their wellbeing.

Dignity and inclusion at work

We want to provide a workplace where every employee is treated with respect. We also want WE to be free from bullying and harassment. All staff will, as standard, attend a course equipping them to understand what diversity and inclusion means within their own role as well as how to recognise and challenge inappropriate workplace behaviour.

We take allegations of bullying and harassment very seriously. We will investigate all complaints promptly, fairly and in strict confidence. If complaints are upheld, we take action according to our disciplinary procedures and our Dignity at Work policy.

Code of ethics

WE employees are expected to meet the highest standards of conduct. These are set out in our Code of Ethics and Standards for Staff, which includes:

- Being professional, politically impartial, respecting confidentiality and complying with the law;
- Using public money efficiently and effectively;
- Promoting equal opportunities and stopping discrimination;
- Meeting high performance standards;
- Fair treatment and disciplinary and grievance procedures;
- A healthy and safe working environment.

The Social Care Commitment

As a responsible employer, WE is fully signed up to the Social Care Commitment¹

The Social Care Commitment is the adult social care sector's promise to provide people who need care and support with high quality services. It is a Department of Health initiative that has been developed by the sector, so it is fit for purpose and makes a real difference to those who sign up. Made up of seven statements, with associated 'I will' tasks that address the minimum standards required when working in care, the commitment aims to both increase public confidence in the care sector

¹ <https://www.thesocialcarecommitment.org.uk/>

and raise workforce quality in adult social care. Making the commitment involves agreeing to the seven statements and selecting tasks to help put those statements into practice. Tasks cover activities such as recruiting the right staff, having a thorough induction, ensuring a strong culture that values dignity and respect and effective communication. Doing the tasks provides an official record of work done, which can raise job satisfaction and increase staff confidence.

The Seven Employer Statements are as follows:

1. I will take account of potential employees' values, attitudes and behaviours when recruiting new staff.
2. I will provide thorough induction for all new staff and for those changing job roles.
3. I will provide timely, appropriate and accessible education, learning and development opportunities to enable my employees to develop and strengthen their skills and knowledge.
4. I will encourage everyone I employ to sign up to the Social Care Commitment and to commit to any codes, standards or registration systems applicable to their job role.
5. I will take responsibility for the values, attitudes and behaviours that my employees display at work, including upholding and promoting equality, diversity and inclusion.
6. I will regularly monitor the skills and behaviour of everyone I employ, ensuring that feedback is encouraged from anyone they support or have direct contact with, including families and carers.
7. I will work to ensure a positive culture and working environment where all employees are supported to do what they've said they will as part of their Social Care Commitment.

The Seven Employee Statements are as follows:

1. I will always take responsibility for the things I do or don't do
2. I will always promote and uphold the privacy, dignity, rights, health and wellbeing of people who need care and support.
3. I will work co-operatively with others to ensure the delivery of safe, high-quality care and support.
4. I will communicate in an effective way to promote the wellbeing of people who need care and support.

5. I will respect people's right to confidentiality, protecting and upholding their privacy and dignity.
6. I will improve the quality of the care and support I provide by constantly reflecting on and updating my own knowledge, skills and experience.
7. I will promote equality, diversity and inclusion by treating all people fairly and without bias.

The WE Competency Framework

Wirral Evolution's competency framework outlines the behaviours that are essential for effective performance in our organisation. The framework forms the basis of our people management processes and provides a common language for **how** we go about our daily work (while performance objectives describe the **what** we do)²

The framework comprises four clusters (working with others, leadership, delivering results and organisational context) and each cluster contains three competencies. Between five and eight competencies have been assigned to each role profile to identify the essential behaviours for effective performance in each role.

Alongside the technical requirements for a role, we also assess behavioural competencies at the application and interview stages to help ensure that our selection processes are focused on the behaviours that are important for success in the role.

Fair pay

The WE supports the principal of implementing the Living Wage for all of its employee's and other fair pay policies. We believe that there is clear evidence that employers benefit across a wide range of areas - recruitment and retention, improved worker morale, motivation, productivity and reputational impacts of being an ethical employer and WE aspire to achieve all of these principles.

² Details are set out in the competency framework guidelines

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Service Contract Agreement for the provision of Day Services

Made between Wirral Borough Council (the Council) and Wirral Evolutions Limited (the Company)

1. Introduction

- 1.1 This agreement is effective from **1st December 2015** and sets out the conditions for Day Services to be provided to the customer either in a building based setting or in the community.
- 1.2 It is intended to help foster a culture of partnership between the Council, the Company and customers who need and are eligible for support and their Carers.
- 1.3 The Company must demonstrate an alignment with the Council's 2020 Vision and meet all the conditions set out in this specification.
- 1.4 This specification intends to encourage a business relationship with the Company built on trust and shared values in respect of achieving positive outcomes for customers who may be vulnerable and who need support in Wirral.
- 1.5 This agreement will be the governing contract between the Council and the Company and therefore will be referred to as the Contract throughout the document.

2. Glossary of Terms

Authorised Officer	The person responsible for letting, managing and supervising the Contract on behalf of the Council and who shall until further notice be the Director of Adult Social Services who may act through designated representatives
Block basis	An arrangement whereby the company is engaged to deliver day services under the terms of this Agreement to a group of Customers for an agreed price.
Carer	A person, paid or unpaid, who supports someone who uses this service
Customer	A person who uses this service
Customer Service Specification	The details of the service to be delivered by the Company to a Customer as set out in their Personal Support Plan and correspondence between the Council and the Company.
Direct Payment	A method of discharging a Personal Budget to a Customer who has chosen to arrange their own personal support by transferring cash resources from the Council to a separate bank account managed by the Customer to be used to fund the services detailed in the personal support plan that meets the outcomes specified within it
Personal Budget	An allocation of funding made available by the Council based on an assessment of a Customer's support needs
Personal Support Plan	A written agreement between the Council and the person using the service which sets out the support that is required to deliver the outcomes agreed in a Support Plan. It forms part of this Agreement insofar as it sets out the specific tasks and support that is required to be provided to a customer by the Company.
Self-Directed Assessment	A statutory assessment of a Customer's needs undertaken by themselves, with or without the assistance of a third party and approved by the Council.
Session	The provision of a service to a single customer for a period between 4-8 hours and a half session shall be such a period of up to 4 hours

Service Specification	Details of the service provided under this Agreement as set out in Appendix 2
Services	The services to be provided by the Company for Customers under this Contract
Wirral Wide	Circumstances where the service will be delivered throughout Wirral and not located in a specific area.
Worker	A person who on behalf of the Provider provides help and support under this Contract to a Customer (including employees, agency workers and agents and sub-contractors)

3. **The Service**

- 3.1 This Agreement is for the provision of the service which provides Day Services and Day Time Opportunities for Wirral residents.
- 3.2 The Company will be providing day services which includes building based and community based activities.
- 3.3 The service will be provided in accordance with the Service Specification (Appendix 2) appended to this agreement.

4. **Service Delivery**

- 4.1 The Company will deliver the outcomes for Customers as stipulated in their Support Plans.
- 4.2 The Company will be required to demonstrate that they have met the Council's Key Performance Indicators as set out by the Council for monitoring the contract. They will also need to demonstrated that they have contributed to the Wirral pledges as set out in the Councils 2020 Vision

5. **Contract and Performance Management**

- 5.1 The Company must comply with all the monitoring and evaluation arrangements set out in this Contract and Service Specification and will:-
- 5.1.1 Allow the Council to attend the services in order to monitor the Standards which will include carrying out spot checks.
- 5.1.2 Ensure that there is a documented system of Quality Assurance including provision for quarterly reviews to ensure the service offered to Customers meets this specification.
- 5.1.3 Operate a system whereby the views of the Customers about the service provided or to be developed are sought and taken account of.
- 5.1.4 Provide to the Quality Assurance Team of the Council reasonable access to employee rotas, incident books and other relevant records and documents relating to the service, except where this conflicts with any overriding duty of confidentiality or the information is commercially sensitive and disclosure is to be limited to those employees of the Council who have a need to know
- 5.1.5 Provide to the Council reasonable access to all data and other records relating to the cost of delivering the Services for the purpose of satisfying itself that the Services are being delivered efficiently and at a reasonable cost to the Council.
- 5.1.6 Inform the Council of any serious event that affects or might affect the well-being or safety of a customer.

- 5.1.7 Allow the Council to interview employees who deliver the service for or on behalf of the Company.
- 5.1.8 As part of the contract monitoring process, the Services will be monitored by the Council at a minimum of once per year. This will also include an annual report (containing information agreed with the Council) which will be provided to the Council.
- 5.2 If either party seek to make changes to the required service levels and standards set out in this agreement, the Council and the Company must be prepared to enter into negotiations to discuss the contract and service changes and come to a mutual agreement about any changes.
- 5.3 The Council may at its discretion share information with Customers or prospective service users and their families about the Company in so far as it relates to the provision of services covered by the agreement in order to assist them making an informed choice about which service they will attend.
- 5.4 The Company will have a named person who will be responsible for the day to day contract performance, who will liaise with the Council, and who will be of sufficient seniority to make executive decisions on behalf of the Company.
6. **Quality Assessment and Assurance Framework**
- 6.1 The Company must have a robust Quality Assurance System in place to cover:-
- 6.1.1 The outcomes for Customers using the service, clearly defining the standards and indicators that need to be achieved and monitored on a continuous basis to ensure the service is run in accordance with the best interests of the person using the services.
- 6.1.2 A documented system for monitoring, recording and acting on the views of Customers using the service regarding activities offered.
- 6.1.3 The standards required, the method of attaining these, and the audit procedure.
- 6.1.4 Customer feedback, which is analysed and measures the success of the service in meeting the outcomes for Customers using the service.
- 6.1.5 The Quality Assurance System report summary must be routinely available to Customers and the council on request
- 6.1.6 A defined process for consulting regularly with Customers and their carers or representatives about the service and mechanisms for taking account of feedback to improve service delivery and achievement of positive outcomes for them.
- 6.1.7 Various means and support arrangements for Customers to give feedback on the services they receive (e.g. questionnaire, interview, phone call, service review etc) and a range of different formats (language, pictorial, font size, etc).
- 6.1.8 When written feedback, both complimentary and constructive, is received the Company will provide a formal response to the person giving feedback noting its receipt and the action that will follow.
- 6.1.9 The Company will be required to complete monitoring information for the Council as agreed from time to time but not less than each and every quarter. The information that is to be provided will be determined by the Council(acting reasonably)

6.1.10 The Company must produce documented procedures(for the delivery of the Services in addition to any other requirement as mentioned in Policies and Procedures (Appendix 1)

6.1.11 As part of the Quality Assurance process, the Company will work with the Council to develop a Contingency Plan to ensure that processes are in place to cover provider failure.

7. **Cost of the service**

7.1 The funding that will be provided to the Company from the Council is as follows:

	Year 1	Year 2	Year 3
	£	£	£
Total Contract Value	4,635,800	4,626,300	4,536,300

7.2 The above funding is based on the provision of 164320 sessions annually

7.3 Additional sessions will be paid for at a cost per session to be agreed between the Council and the Company and determined on the basis of eligible assessed needs for that additional session.

8. **Financial Arrangements**

8.1 On the 10th day of each and every month the Company will receive payment from the Council for the services provided under this Contract being the proportion of the annual contract sum calculated by dividing the total number of days in the month by the number of days in the year.-

8.2 In respect of any additional services the Company will invoice the Council four weekly in arrears for services it has provided under the terms of this Agreement. Invoices must be in an electronic format acceptable to the Council.

8.3 The Council will pay invoices by BACS within 28 days of the invoice date except where an invoice is considered to be in error or not reconcilable with service additions whereupon the Council shall make appropriate enquiries and then reach a decision on payment within a reasonable period of time after it has obtained all reasonably available and relevant information.

9. **Unit cost for the service**

9.1 The Council and the Company will agree a unit cost for the services during the initial three years of this contract and from the commencement of the fourth year of the Contract or such later date as may be agreed the Council will pay for the service at the agreed unit cost for sessions that are delivered. In default of agreement , the Council may terminate the Contract on giving the Company not less than 12 months' notice in writing

10. **Number of Sessions**

10.1 Additional placements above the sessions agreed as part of the block contract, may be commissioned by the Council on a sessional basis, at the cost that is agreed by the Council and the Company

10.2 If Customers who are provided with a service under the block contract leave the service, their sessions will be allocated to an individual/s that the Council commission under this block contract on the basis of eligible assessed needs.

11. **Staffing**

- 11.1 The Company must ensure that they have the appropriate staffing levels to deliver the service and ensure the safety of the Customers.
- 11.2 The Council will not be responsible for the payment of redundancy of staff.

12. **Insurance and Indemnity**

- 12.1 The Company will indemnify and keep indemnified the Council against any liability as regards the death of or injury to any person or the loss of or damage to any property connected with the provision of the service or any act of the Company except and to the extent that it may arise out of a negligent act of the Council, its employees or agents not being the Company or employed by the Company. The Company must:-
 - 12.1.1 Comply with all relevant and any future legislation that might apply to the services defined in this Agreement.
 - 12.1.2 Maintain Public Liability Insurance in the minimum sum of £5million for any one claim or series of claims arising out of one event.
 - 12.1.3 Maintain Employers Liability Insurance in the minimum sum of £10 million for any one claim or series of claims arising out of one event.
 - 12.1.4 Maintain comprehensive insurance cover for any motor vehicle used in connection with any part of the service that complies with the Road Traffic Act 1972 and is adequate for the type of use being made in connection with the service.
 - 12.1.5 Procure and maintain the above mentioned insurance(s) with a reputable company or companies approved by the Council.
 - 12.1.6 make available to the Council upon request copies of the above mentioned insurance policies together with receipts for current premiums relating to their requirements.

13. **Termination**

- 13.1 Either party may terminate the Contract at any time by giving not less than 12 months' notice in writing expiring on the anniversary of the commencement of the Contract.
- 13.2 Without prejudice to the exercise of any other rights and remedies a party may possess, one party may terminate the contract with immediate effect or by giving notice if the other party:-
 - 13.2.1 Is persistently in breach of its obligations under the terms of the agreement, or
 - 13.2.2 Commits a material breach of any of its obligations under the contract or
 - 13.2.3 Where a breach is capable of being remedied, fails to remedy such breach within the period of time specified in a notice served in accordance with Clause16
- 13.3 The Company's persistent failure to provide all or part of the Service in accordance with this Contract during the period of the Contract will (without limitation) be regarded as a material breach of Contract, and the Council shall be entitled to recover reasonable costs resulting from any such failure that are directly attributable to obtaining services from an alternative Provider.

- 13.4 The following reasons shall entitle the Council to terminate the Contract with immediate effect if the Company, or worker acting on behalf of the Company (in relation to 13.4.3. 13.4.4, 13.4.5. 13.4.6,),
- 13.4.1 Becomes bankrupt, or becomes subject to any application or arrangement or process under the Insolvency Act 1986, including liquidation, administration or receivership
 - 13.4.2 Is convicted of a criminal offence having a direct bearing on the fitness to carry out the Company's obligations under the Contract,
 - 13.4.3 Takes advantage, financial or otherwise, of the relationship with the Customer, their Carer, or other member of their family,
 - 13.4.4 Offers, gives, or agrees to give to any person any gift or consideration of any kind as an inducement or reward for doing or not doing any action in relation to the execution of the Contract,
 - 13.4.5 Gives or offers any gift or consideration whatsoever as an inducement or reward to any employee or Member of the Council for doing or forbearing to do any action in relation to this or any other Contract with the Council,
 - 13.4.6 If there is evidence of any other corrupt practice on the part of the Company its agents or sub-contractors including any offence under the Bribery Act 2010.
- 13.5 Where notice of termination is served for any of the reasons described above in Clauses 13.2 to 13.4 and the termination takes effect, the server shall be entitled to recover from the other party the reasonable amount of any loss resulting from such termination and any loss directly attributable to any breach of this Contract which preceded the termination.
- 13.6 Termination of this Contract, for whatever reason, shall not affect the liability of either party for the payment of any sums arising under this Contract prior to the date of its termination.
- 13.7 In the event of there being served any notice to terminate the Contract in accordance with any provision of the Contract either party may dispute the proposed termination and such issue may be determined in accordance with a procedure for Resolution of Disputes and for Mediation to be agreed by the parties.
- 13.8 In the event that this Contract is terminated, the Provider must continue to supply the Service up to and including the date of termination or until such time as arrangements are made to transfer ongoing personal support arrangements to an alternative provider.. The Company shall render all reasonable assistance to and cooperation with, the Council in the implementation of the arrangements for the transfer of the personal support arrangements to any alternative provider or to the Council.
14. **Assignment and Sub-contracting**
- 14.1 The Company may not assign the benefit or advantage of this Contract or the specified services without the previous written consent of the Council. The Company may enter into subcontracts for the delivery of the Services with the prior written consent of the Council such consent not to be unreasonably withheld. Such consent if given:-
- 14.1.1 Will involve the vetting of any potential sub-contractor by the Council
 - 14.1.2 Will not relieve the Provider of any liability or obligation under the contract
 - 14.1.3 Will not relieve the Provider becoming liable for the acts, defaults or neglect of its sub-contractor or its agents or employees.

14.2 The Council may not assign the contract except where there may be statutory succession. Upon any such assignment all obligations and responsibilities imposed by this contract shall be released except for liabilities connected to any antecedent breaches, and except as provided for in relevant legislation.

15. **Variation**

15.1 Subject to Clause 15.2, variations to this Contract may not be made unless they are made by agreement in writing and by mutual consent.

15.2 Notwithstanding Clause 15.1, variations to the Personal Support Plan and the Customer Service Specification which reflects the changing needs of the Customer as determined by the Council's statutory assessment of need may be made by the Council and communicated to the Company. The Company shall deliver the service in accordance with such variations.

16. **Default**

16.1 Where either party fails to comply with any of the provisions of the Contract the party not in default may serve notice in writing stating the provision of the contract with which the party is considered to be non-compliant and requiring remedial action (if practicable) within a specified period of time.

16.2 When notice of default is issued to the Company it is required to:-

16.2.1 Submit an action plan within 5 working days) with reasonable time scales identifying what action will be taken to address the default in the provision of the contract. Failure to do so will be a material breach of contract.

16.2.2 The Company will be invited to attend a meeting with the Council following the receipt of the action plan for scrutiny and determination by the Council of reasonable time scales, for carrying out the remedial action it requires.

16.2.3 Not used

16.2.4 The Council may serve a further notice on the Company which determines the time scales within which the defaults identified by the Council. at the meeting referred to above or otherwise shall be remedied

16.3 If the Company fails to meet the required standards of Services pursuant to the Contract, then without prejudice to any other right or remedy the Council may have, and without terminating the Contract, the Council may:-

16.3.1 Itself provide or procure the provision of the relevant part of the Service from a third party not specified in this Contract until the breach has been remedied to the reasonable satisfaction of the Council and recover the reasonable costs thereof from the Company

16.3.2 Deduct from any sums due or otherwise charge to the Company the reasonable cost of any Service so provided together with relevant administration costs.

16.3.3 Stop or suspend all further referrals to the Company until satisfied that the default has been remedied.

16.4 Where the Council is in default under the terms of the Contract the Company will be entitled to recover reasonable costs from the Council that are directly attributable to the default referred to in the notice, but only if the Service Provider has served notice of Default on the Council specifying the breach and a reasonable period within which it is to be remedied and the Council has failed to comply with that notice

17. **CONFIDENTIALITY**

17.1 Subject to **clause 17.2**, the Parties shall keep confidential all matters relating to this Deed and shall use all reasonable endeavours to prevent their representatives from making any disclosure to any person of any matters relating hereto.

17.2 **Clause 17.1** shall not apply to any disclosure of information:

17.2.1 required by any applicable law, provided that **clause 18.2** shall apply to any disclosures required under the FOIA;

17.2.2 that is reasonably required by persons engaged by a Party in the performance of such Party's obligations under this Deed;

17.2.3 where a Party can demonstrate that such information is already generally available and in the public domain otherwise than as a result of a breach of **clause 17.1**;

17.2.4 which is already lawfully in the possession of the receiving party, prior to its disclosure by the disclosing party;

17.2.5 by the Council or Wirral Evolutions to any other department, office or agency of the Government; and

17.2.6 by either Party with the other Party's prior written consent.

18. **FREEDOM OF INFORMATION**

18.1 Each Party acknowledges that the other is subject to the requirements of the FOIA and each Party shall assist and cooperate with the other (at its own expense) to enable the other Party to comply with its Information disclosure requirements.

18.2 Nothing in this Deed shall prevent either Party from disclosing any Information it holds whether relating to this Deed or otherwise which either party in its absolute discretion considers it is required to disclose in order to comply with FOIA and any other statutory requirements whether or not existing at the date of this Deed. However, in the case of Information relating to this Deed the Party receiving the Request for Information (the "**Receiving Party**") shall consult the other Party (the "**Consulting Party**") as soon as practicable after receipt of the request before disclosing any Information.

18.3 The Consulting Party shall respond to the Receiving Party pursuant to **clause 18.2** as soon as reasonably practicable and in any event within five Business Days by either;

18.3.1 consenting in writing to the disclosure; or

18.3.2 providing the Receiving Party with written representations as to why it believes the Information is covered by an exemption or exception under the FOIA.

18.4 The Receiving Party shall take the Consulting Party's views into account when considering whether it has a duty to disclose the Information under the FOIA and shall notify the Consulting Party of its decision prior to disclosure. If a Receiving Party shall at any time notify the other (the "**Notified Party**") that it has received a Request for Information in respect of which the Receiving Party requires the assistance of the Notified Party then:

18.4.1 the Notified Party shall at its own cost provide and procure that any of its sub-contracts (if any) provide all necessary assistance required by the Receiving Party in order to allow that party to comply with the Request for Information within the period or periods when it is obliged to respond to the Request for Information;

- 18.4.2 without limitation to the foregoing the Notified Party shall at its own cost within five Business Days of request supply and procure that any of its agents, servants, employees or sub-contractors (if any) supply to the party such Information and documents as it holds on behalf of the Requesting Party as requested by that party in such form as reasonably prescribed by that party; and
- 18.4.3 the Notified Party shall ensure that all Information produced by the Notified Party or any of its agents, servants, employees or sub-contractors in the course of performing any of its obligations under this Deed is retained for disclosure and shall permit the party to inspect such records as required from time to time.
- 18.5 In the event that a Receiving Party shall at any time receive any Request for Information relating to this Deed or any activities or business of the other party which the Receiving Party does not hold then the Receiving Party shall transfer the Request for Information to the other party as soon as reasonably practicable and in any event within two Business Days of receipt.
19. **DATA PROTECTION**
- 19.1 The Parties will comply with any notification requirements under the DPA and both Parties shall duly observe all their obligations under the DPA, which arise in connection with the Deed and/or any Personal Data to be processed in connection with the Deed.
- 19.2 Notwithstanding the general obligation in **clause 19.1**, where Wirral Evolutions is processing Personal Data as a Data Processor for the Council, Wirral Evolutions shall:
- 19.2.1 only process such Personal Data for any purposes connected with the management of the Transferring Employees, for the purposes for which such information was originally collected or for any other lawful purpose and on instructions received from the Council from time to time;
- 19.2.2 ensure that it has in place appropriate technical, organisational and contractual measures to ensure the security of the Personal Data and to prevent the accidental or unlawful destruction of or accidental loss of, alteration to, unauthorised disclosure of or access to Personal Data as required under the Seventh Data Protection Principle in **Schedule 1** to the DPA;
- 19.2.3 not cause or permit the Personal Data to be transferred outside the European Economic Area (as defined in the DPA) without the prior written consent of the Council;
- 19.2.4 provide the Council with such information as the Council may reasonably require to satisfy itself that Wirral Evolutions is complying with its obligations under the DPA;
- 19.2.5 promptly notify the Council of any breach of the security measures required to be put in place pursuant to **clause 19.2**; and
- 19.2.6 not do or omit to do anything which places the Council in breach of the Council's obligations under the DPA.
- 19.3 The provisions of this clause shall apply during the continuance of the Deed and indefinitely after the Transfer Date.

20. NOTICES

20.1 Any notice to be given under this Deed shall either be delivered personally or sent by facsimile or sent by first class post or electronic mail. The address for service of each Party shall be as set out in **clause 20.3** or such other address as each Party may previously have notified to the other Party in writing. A notice shall be deemed to have been served if:

20.1.1 personally delivered, at the time of delivery;

20.1.2 sent by facsimile, at the time of transmission;

20.1.3 posted, at the expiration of 48 hours after the envelope containing the same was delivered into the custody of the postal authorities; and

20.1.4 if sent by electronic mail, at the time of transmission and a telephone call must be made to the recipient warning the recipient that an electronic mail message has been sent to him (as evidenced by a contemporaneous note of the Party sending the notice) and a hard copy of such notice is also sent by first class recorded delivery post (airmail if overseas) on the same day as that on which the electronic mail is sent.

20.2 In proving such service, it shall be sufficient to prove that personal delivery was made, or that the envelope containing such notice was properly addressed and delivered into the custody of the postal authority as prepaid first class, or that the facsimile was transmitted on a tested line or that the correct transmission report was received from the facsimile machine sending the notice, or that the electronic mail was properly addressed and no message was received informing the sender that it had not been received by the recipient (as the case may be) and a contemporaneous note of the telephone call warning the recipient that the electronic mail message has been sent to him was made.

20.3 The address for service of notices as referred to in **clause 20.1** shall be as follows unless otherwise notified to the other Party in writing:

20.3.1 if to the Council, addressed to the *[insert details]*;

Tel: *[insert details]*

Fax: *[insert details]*

E-Mail: *[insert details]*

20.3.2 and

20.3.3 if to Wirral Evolutions, addressed to the *[insert details]*;

Tel: *[insert details]*

Fax: *[insert details]*

E-Mail: *[insert details]*

21. FORCE MAJEURE

21.1 Force Majeure Event means any circumstance not within a Party's reasonable control including, without limitation:

21.1.1 acts of God, flood, drought, earthquake or other natural disaster;

21.1.2 epidemic or pandemic;

- 21.1.3 terrorist attack, civil war, civil commotion or riots, war, threat of or preparation for war, armed conflict, imposition of sanctions, embargo, or breaking off of diplomatic relations;
 - 21.1.4 nuclear, chemical or biological contamination or sonic boom;
 - 21.1.5 any law or any action taken by a government or public authority, including without limitation imposing an export or import restriction, quota or prohibition;
 - 21.1.6 collapse of buildings, fire, explosion or accident; and
 - 21.1.7 any labour or trade dispute, strikes, industrial action or lockouts; and
 - 21.1.8 interruption or failure of utility service.
- 21.2 Provided it has complied with **clause 21.4**, if a Party is prevented, hindered or delayed in or from performing any of its obligations under this Deed by a Force Majeure Event (the "**Affected Party**"), the Affected Party shall not be in breach of this Deed or otherwise liable for any such failure or delay in the performance of such obligations. The time for performance of such obligations shall be extended accordingly.
- 21.3 The corresponding obligations of the other Party will be suspended, and its time for performance of such obligations extended, to the same extent as those of the Affected Party.
- 21.4 The Affected Party shall:
- 21.4.1 as soon as reasonably practicable after the start of the Force Majeure Event, notify the other party of the Force Majeure Event, the date on which it started, its likely or potential duration, and the effect of the Force Majeure Event on its ability to perform any of its obligations under the Deed; and
 - 21.4.2 use all reasonable endeavours to mitigate the effect of the Force Majeure Event on the performance of its obligations.
- 21.5 If the Force Majeure Event prevents, hinders or delays the Affected Party's performance of its obligations for a continuous period of more than 12 weeks, the Party not affected by the Force Majeure Event may terminate this Deed by giving four weeks' written notice to the Affected Party.
- 21.6 If the Force Majeure Event prevails for a continuous period of more than 6 months, either Party may terminate this Deed by giving 14 days' written notice to the other Party. On the expiry of this notice period, this Deed will terminate. Such termination shall be without prejudice to the rights of the parties in respect of any breach of this Deed occurring prior to such termination.

22. **RIGHTS AND REMEDIES**

- 22.1 Except as expressly provided in this Deed, the rights and remedies provided under this Deed are in addition to, and not exclusive of, any rights or remedies provided by law.

23. **SEVERANCE**

- 23.1 If any term of this Deed is found by any court or body or authority of competent jurisdiction to be illegal, unlawful, void or unenforceable, such term will be deemed to be severed from this Deed and this will not affect the remainder of this Deed which will continue in full force and effect. In this event the parties will agree in accordance with **clause 15** a valid and enforceable term to replace the severed term which, to the maximum extent possible, achieves the parties' original commercial intention and has the same economic effect as the severed term.

24. **NO WAIVER**

24.1 A delay in exercising or failure to exercise a right or remedy under or in connection with this Deed will not constitute a waiver of, or prevent or restrict future exercise of, that or any other right or remedy, nor will the single or partial exercise of a right or remedy prevent or restrict the further exercise of that or any other right or remedy. A waiver of any right, remedy, breach or default will only be valid if it is in writing and only in the circumstances and for the purpose for which it was given and will not constitute a waiver of any other right, remedy, breach or default.

25. **THIRD PARTY RIGHTS**

25.1 The parties do not intend that any term of this Deed will be enforceable under the Contracts (Rights of Third Parties) Act 1999 by any person.

26. **ENTIRE AGREEMENT**

26.1 This Deed constitutes the entire agreement between the parties and supersedes any prior agreement or arrangement in respect of its subject matter and:

26.1.1 Neither Party entered into this Deed in reliance upon, and it will have no remedy in respect of, any misrepresentation, representation or statement (whether made by the other party or any other person and whether made to the first party or any other person) which is not expressly set out in this Deed; and

26.1.2 nothing in this **clause 26** will be interpreted or construed as limiting or excluding the liability of any person for fraud or fraudulent misrepresentation.

27. **COUNTERPARTS**

27.1 This Deed may be executed in any number of counterparts, each of which will constitute an original, but which will together constitute one deed.

28. **GOVERNING LAW AND JURISDICTION**

28.1 This Deed (including any non-contractual obligations relating to it) will be governed by and interpreted in accordance with the law of England and Wales.

Appendix 1

Policies and Procedures

The Provider must be able to produce on request by, and to the satisfaction of, the Council the following records and documented procedures in addition to any other requirement of any other clause in this Agreement:-

1. (a) Statement of Purpose, incorporating the Company's aims and objectives,
2. (b) Complaints and compliments procedure
3. (c) Record of complaints and outcomes
4. (d) Customers Consultation process
5. (e) Staff Training and Development Plans
6. (f) Review records
7. (g) Risk assessment documents
8. (h) Risk assessment records
9. (i) Guidance for all staff on safety precautions to be taken following assessment of risk, including written procedures on Fire prevention, First Aid, Safe use of Electricity, Food Safety and Hygiene, Safe Moving and Handling, Control of Infection and reporting Infectious Diseases, self-management of medication, reporting of injuries, diseases, accidents and dangerous occurrences;
10. (j) Moving and handling training records
11. (k) Staff rotas
12. (l) A staffing structure and scheme of delegation of the organisation, indicating managerial relationships between staff, and how information can be effectively communicated throughout the organisation
13. (m) Staff supervision records
14. (n) Policies relating to equality, diversity and anti-oppressive practice
15. (o) Policies to illustrate that information for Customers and their families can be made available in an appropriate range of formats and languages
16. (p) Policies regarding confidentiality and access to records
17. (q) Log of requests to access records
18. (r) Register of gifts, bequests accepted and refused from Customers
19. (s) Policy relating to the transmission of blood borne viruses such as HIV, AIDS and Hepatitis B

20. (t) Record of emergency service documentation received prior to commencement of service
21. (u) Financial policies and procedures
22. (v) Safeguarding Policies and Procedures

The Council will make available to Company on request copies of its own policies and procedures as amended from time to time which shall be the acceptable minimum standards.

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Appendix 2

Day Opportunities for Adults who use Services Service Specification

1. Introduction

- 1.1 Wirral Council currently commissions a range of day opportunities for adults who use services. There is a commitment by the Local Authority to work in partnership with all stakeholders to reconfigure services so that they continue to meet both current and future needs within the resources available.
- 1.2 It has been recognised that the way services are commissioned and provided for people who use services will continue to evolve, and Wirral Council is fully committed to a person-centred and self-directed approach to service commissioning.
- 1.3 Guiding Principles
- An understanding that changing the way in which organisations and professionals work can improve outcomes for people who use services and their families/Carers.
 - People who use services and their families have natural authority and are best placed to be their most powerful and enduring leaders, decision makers and advocates.
 - Families, friends and personal networks are the foundations of a rich and valued life in the community.
 - People who use services and their families are in the best position to determine their own needs and goals and to plan for the future.
 - Individuals and their families will directly commission the support they receive if they wish to.
 - Communities are enriched by the inclusion and participation of people who use services, and these communities are the most important way of providing friendship, support and a meaningful life to people who use services, their families and Carers.
 - The lives of people who use services are enhanced when they can determine their preferred supports and services and control the required resources, to the extent that they wish.
 - Partnership between individuals, families and Carers, communities, local government, service providers and the business sector are vital in meeting the needs of people who use services.
 - People are supported to gain the skills, development and progression in order to be as independent as possible.
- 1.4 In the light of growing demand for support and the limitations on public funding that are a feature of the current economic downturn, it is more important than ever that public services make best use of resources by securing the right day opportunity and support services for people who use services. At the same time there are opportunities to secure better outcomes whilst targeting our spending at the right things. This requires a model of support that concentrates on enablement and self-actualisation rather than dependency on long-term care.

- 1.5 An effective Adults Day Opportunity Service should provide a service for adults with the aim of ensuring they can participate in and help steer the services required, taking into account their specific needs. Day opportunities should also enable people to make informed decisions and choices.

2 Definition

2.1 Day Opportunities

2.1.1 For the purpose of this Day Opportunities delivery specification, a day opportunity is defined as a support and activity service provided during the day (including evening and weekends) for the purpose of delivering outcomes specified in the attendee's support plan and to provide respite for the Carer of a person who uses services.

2.1.2 A day opportunity would ordinarily be utilised to enhance a person's life through social interaction, opportunities to be independent and experiences to encourage self-realisation. They might also specifically offer a safe environment for a vulnerable person and/or a means of providing personal care. It is expected that day opportunities would normally take place away from the home environment.

3 Purpose of the Service

3.1 The purpose of Day opportunities is to support the person who uses services in improving their quality of life. Day opportunities should assist the person who uses services to lead an independent and fulfilling life, help them to maintain a healthy lifestyle, and to promote and enhance effective personal support networks. This supports Wirral Council's commitment to helping people live safely and independently, and be socially included within their local communities.

3.2 A successful day opportunity should support the person who uses services to take greater control of their own life and encourage them to remain as independent as possible within their own home, the community and within their chosen way of life.

3.3 The person who uses services must be at the centre of all decisions about how they are supported. The Service Provider should provide services in such a way that the person who uses services is able to feel secure, confident and included in all decisions regarding the service provided to them.

4 Aims of the Service

4.1 The intention is to commission day opportunities for adults who use services that meet future service demands, and to develop services in line with the national and local agendas including high level partnership working and promotion of independence and self-actualisation.

4.2 Day Opportunities for adults who uses services aims to provide:

- Faster and efficient access to a choice of appropriate help and support for people who use services delivered in a person-centred and individual way.
- More choice and control for individuals and their Carers.
- A more consistent and equitable service to a greater number of local people who use services.
- A more evidence based approach to service delivery.
- Ensuring best service quality and value for money.
- An increase in the number of people who use services who achieve increased independence through paid employment.

4.3 **Expected key outcomes include:**

- Improved user experience and satisfaction.
- Improved Carer experience and satisfaction.
- To provide social contact and stimulation.
- To offer meaningful activities which maintain and enhance physical and mental wellbeing.
- To provide a place where people who use services can be helped to access universal services.
- To provide (or provide access to) education and training opportunities.
- To maintain/restore and develop independence including basic life-skills.
- Care and monitoring of highly dependent or frail and vulnerable adults.
- Low level support and monitoring for adults at risk.
- Support and advice for Carers including respite care.
- To assist recovery and rehabilitation after a critical episode.
- An improved level of social inclusion.
- Increased levels of independence and self-actualisation.
- Significant reduction in overall service operational costs.

4.4 **Objectives of the service**

- Provide services that are person-centred and meets individual needs.
- Provide support for people who use services and their Carers.
- Promote re-enablement model of support.
- Promote community engagement.
- Increase the amount of choice and control users and their Carers have in their lives.
- Use a quality assurance framework to measure the quality of outcomes and further develop day services.

4.5 **Core Values**

4.5.1 Wirral Council has determined the following values to be paramount when commissioning day opportunities for adults who use services.

- Treating people who use services as individuals and promoting their dignity, independence and self-determination. People who use services will be valued for their own individual skills, abilities and strengths. This means listening and responding to people who use services, in an effort to understand their unique position. It also means being open to learning as each individual has a valuable contribution to make.
- Responding flexibly to a change in a person's circumstances.
- A commitment and ethos of consulting and involving people who use services.
- People who use services will have opportunities to make independent choices as individuals.
- People who use services have a right to friendships and relationships. This increases independence and reduces reliance on publicly funded services.
- Seeking to achieve a balanced approach to risk, which gives people who use services control and the right to make mistakes without serious implications for their security and safety.
- In all aspects of service provision and employment, no employee or people who use services should receive less favourable treatment than another on grounds of race, sexuality, age, ability, etc.
- Promoting fair access and aim to ensure that the service reflects the needs of Black and Ethnic minority communities.
- Assisting people who use services to realise personal aspirations and abilities in aspects of daily life, focussing on assisting people who use services to realise their potential and aspirations in the context of maintaining their independence and participation in the community.
- Every people who use services, regardless of their circumstances, is a unique and intrinsically valued human being. An active awareness of this shall be

demonstrated by all services, particularly in areas where dignity may be most at risk.

- Reduce social isolation, promoting social inclusion and integration.
- People who use services, irrespective of their living situation will retain all their rights, entitlements and responsibilities when they enter services and shall be helped to preserve and exercise them.
- Working with people who use services to achieve realistic and achievable goals and outcomes.
- The day opportunity service recognises that the quality of services will be measured against national and local standards, but will also be measured against the expectations of people who use services and Carers.

4.5.2 Where they are ready to do so, people who use services should be supported to seek paid employment in the open market.

5 The Nature of the Service

5.1 Under this Specification, the nature of a Day Opportunity is the provision of services away from the Service User's home during waking hours.

5.2 Day Opportunities are about providing opportunities for people to learn new skills through further and adult education, spending time with friends and most important of all the chance to get a real job. This also includes taking part in a wide range of social and leisure activities that do not necessarily need to be undertaken within a day centre setting.

5.3 Day Opportunities need to reflect the future need of people who use services, ensuring that there is increases in the real choices people have over how they spend their days. There should be an agreement about how to achieve the outcomes disabled people have identified; making sure the right support is in place at the right time.

6 Eligibility for the service

6.1 Wirral Council is currently required, for Adult Social Care Services; to apply eligibility criteria based on the Local Authority Circular LAC (2002) 13 "Fair Access to Care Services – Guidance on Eligibility Criteria for Adult Social Care".

7 Service Levels

7.1 The Provider will produce clear concise information that is accessible to the intended Service User group describing the core elements of the service to be delivered and the cost of these.

7.2 If the service is not able to accommodate any particular care/support needs these should be stated.

7.3 Where there are additional/optional service elements available at additional cost these should be described and the cost stated.

7.4 When quoting for costs for core level of service these **must** be expressed as either:

- A cost per hour
- A cost per half session (a period of up to 4 hours)
- A cost per full session (a period between 4-8 hours)
- A cost for evening or weekends

7.5 Refreshments throughout the day should be provided regardless of the length of the session (this may be costed separately).

- 7.6 When quoting costs for additional/optional service elements this must be expressed as the **total** cost for the additional/optional element.

8 Monitoring of Changing Needs

- 8.1 People using the service, their families, friends and advocates will be involved in the monitoring process.
- 8.2 The Provider will feedback to the Department any information relating to any change in circumstances in the needs of the person (be this an increase/decrease in support required) using the service.

9 Performance Management and Monitoring

9.1 Quality Assurance

- 9.1.1 Performance of the Provider will be measured using the agreed Quality Assurance Framework as referenced in the terms and conditions of the contract.

9.2 Monitoring and Review

- 9.2.1 The Provider will maintain an appropriate management information systems, that will enable the provider to evidence the quality and compliance in all areas of the service and will present this information for the purposes of monitoring and contract compliance.
- 9.2.2 The Provider will complete and submit as a minimum an annual self-assessment that will be validated by visits in a variety of venues, and will have themed focus areas:
- 9.2.3 The provider will meet with the Contracts Lead officer at a frequency prescribed by the Contracts Lead.

10 Key Performance Indicators

- 10.1 Also see Terms and Conditions for the Minimum Dataset

10.2 People who use Services being Valued Members of the Community

- 10.2.1 The Provider will be required to evidence that people who use services have access to and are able to participate in the multitude of resources and social experiences which make up community life.
- 10.2.2 The Provider will be required to evidence that the Day Opportunity supports people who use services aspirations in everyday community life; from supporting and participating in various activities including leisure, to assisting the person who uses services to become part of their community.

10.3 People who use services realising their Aspirations

- 10.3.1 The Provider will be able to evidence that the person who uses services is encouraged to define and realise their own goals and aspirations.
- 10.3.2 The Provider will also be able to demonstrate that the Day Opportunity assists people who use services in their aspirations by supporting long-term learning or social opportunities; or shorter-term activities
- 10.3.3 The Provider will be able to demonstrate that the Day Opportunity offers people who use services focused encouragement, motivation and support in order to achieve these aspirations, and any practical assistance necessary for their facilitation.

10.4 People who use services have a Social Life

- 10.4.1 The Provider will be able to evidence that the people who use services have chosen how they will spend their time and who they will socialise with.
- 10.4.2 The Provider will be able to demonstrate that the Day Opportunity has assisted the people who use services to visit, utilise, contribute to and be a valued member of any facilities in ordinary places that define local community life.
- 10.4.3 The Provider will be able to evidence that through facilitating this process, the person who uses services feels more confident about facing the challenges that accompany new social experiences.
- 10.4.4 The Provider will be able to demonstrate that the person who uses services feels confident to access social opportunities without the need for support.
- 10.4.5 The Provider will be able to demonstrate that the Day Opportunity has supported people who use services to maintain personal relationships and cultural issues which they may face in day to day life.

11 Delivery of the Service

11.1 Location

- 11.1.1 Where services are community based, there need not be a specified building from which to deliver these services. However, where an activity could be affected by external issues such as weather conditions, a suitable alternative should be provided. Contingency plans must be made available if the service cannot be delivered from the usual site. Community bases and activities should be available to people with all levels of need and consideration should also be given to accessibility, with disabled access provided wherever possible.
- 11.1.2 Where an accommodation base is provided, it/they will be of sufficient and flexible size to accommodate the number of people using the facility, having quiet space for people who wish to take a break.
- 11.1.3 The Provider will ensure that bases are maintained in good order and have suitable facilities/equipment to meet the assessed needs of the people who use services accessing the service. Bases will meet the Disability Discrimination Act requirements and all requirements of legislation in respect of Health and Safety, Fire Precautions and Environmental Health will be satisfied.
- 11.1.4 Service bases must be suitable in terms of toileting and changing facilities and accommodate those who cannot use a standard disabled toilet. In exceptional circumstances another facility nearby can be accessed for toileting and changing (e.g. a local health centre). Toileting and changing areas should not be unisex.

11.2 Equipment

- 11.2.1 The Provider will possess all necessary equipment appropriate for the services being delivered, excluding personal items which the person who uses services would be expected to possess. Equipment will be maintained in accordance with Health and Safety legislation and the manufacturers' guidance, supervised by suitable trained staff when in use and stored safely when not in use.
- 11.2.2 Providers should also ensure that they have appropriate administrative resources including email, phone, photocopying etc, to support the needs of the services being delivered.
- 11.2.3 This service will be delivered across Wirral and allocation will be through the Care Arranging Team.

- 11.2.4 The service should always take place in a location that promotes independence and least removes the person in receipt from their local community and social support networks.
- 11.2.5 The Provider will advise the Council of the days and times that the Service will operate. Where a Service operates on Bank Holidays no enhanced payment will be made by the Council for attendees.

12 Risk Taking

- 12.1 The Provider will ensure that where a risk assessment is needed, they will communicate with families, Carers, Advocates and practitioners to collate relevant information.
- 12.2 The Provider should acknowledge that all people who use services are entitled to take risks, but should ensure that all information and the consequences of actions are given to the person to enable them to make an informed choice.
- 12.3 The Provider will need to ensure that there are contingency plans in place so that the person able to take the risk in a safe and positive way.
- 12.4 The Provider is required to make any necessary assessment of the risks to their own employees in relation to lone working.
- 12.5 The Provider will promote, adopt and comply with Wirral Council's 'Positive Risk Taking Policy'.

13 Confidentiality

- 13.1 The Provider will have a written policy on confidentiality which must be accessible and available to all the people who use the service.
- 13.2 The policy should ensure that any personal information disclosed to the Provider in the course of its work must be treated as confidential and should only be disclosed with the consent of the person who uses services concerned.
- 13.3 There is a requirement, on request that the Provider shares relevant information about the people who use services to the commissioners.

14 Legislation and Guidance

- 12.1 The provider will comply with any relevant legislation, indicators of good practice and policy objectives that are contained in:
- 12.2 Mental Capacity Act (2005) and Deprivation of Liberty Safeguards
- 12.3 Dignity in Care/Respect Agenda
- 12.4 The Health & Social Care Act (2008) (Regulated Activities) Regulations 2010 – Essential Standards of Quality and Safety
- 12.5 Valuing People Now (2009)
- 12.6 Valuing Employment Now (2009)
- 12.7 Putting People First (2007)
- 12.8 A Life Like Any Other (2008)
- 12.9 Healthcare for All (2008)

- 12.10 Department of Health Guidance – ‘No Secrets’
- 12.11 Independent Living Strategy (2008)
- 12.12 Our Health, Our Care, Our Say (2006).
- 12.13 Promoting Equality (2007)
- 12.14 Think Local Act Personal (2010)

DRAFT

Update for Families and Wellbeing Policy and Performance Committee

November 2015

Background

Healthwatch (HW) was born out of the Health and Social Care Act 2012. The Act stipulates the creation of:

- A national body, Healthwatch England (*instituted in September 2012*), which is a statutory committee of the Care Quality Commission
- A local Healthwatch organisation for each local council in England with social care responsibilities by 1st April 2013.

Healthwatch has similar, but increased, powers and responsibilities to Local Involvement Networks (LINKs) - its predecessor set up in 2008. Healthwatch is intended to strengthen the collective voice of users of health and social care services and members of the public, both nationally and locally.

The services covered by Healthwatch are:

- i) all NHS services, including those commissioned by the Clinical Commissioning Groups in each area, the NHS trusts serving the residents of the area; and primary care
- ii) social care services for adults, children and young people commissioned or delivered by the Local Authority

There are 152 Healthwatch across the Country and each are funded, and supported, differently by their Local Authorities. There is a national body called Healthwatch England, which collects the local intelligence to form a national picture. HW offers the public, and the public sector, an independent and unbiased appraisal of what the public feel about their care services.

HW Wirral receives £170k per annum and we have 4 x f/t and 1 p/t staff. We have a 5 strong Board of Directors (all volunteers) who were recruited for their skills in business.

HW has 24 active volunteers (excluding the Board). The volunteer activity is split between Enter & View and the actions from the Task & Finish Projects and the Standing groups such as Communications, Operations and Quality Assurance. We have a mailing list of over 500 who receive our e-bulletin monthly. HW Staff provide Induction and Enter & View Training and encourage volunteers to attend conferences and any other training identified. Volunteers receive a Handbook, one to one support and any out of pocket expenses.

HW premises is Pacific Road Business Hub, Birkenhead. We have a website (with a Speak Out section), twitter account and an info@healthwatchwirral.co.uk email address which we respond to within 24 hours. We are also a member of the Chamber of Commerce.

Purpose

Local Healthwatch organisations are typically expected to discharge the following main functions:

- Influence service commissioners through gathering, collating and analysing views and experiences of citizens and communities;
- Promote and support the engagement and involvement of people in the commissioning and provision of health and social care services and how they are monitored;
- Investigate specific issues and concerns about health and adult social care services and prepare reports and recommendations to the appropriate agencies;
- Contribute to the development of safe, high quality services and the learning and sharing of best practice to secure continuous improvement;
- Provide advice and information to citizens and communities about how to access services and support them in making informed choices;
- Represent the Borough's communities on the Health and Wellbeing Board.

Healthwatch is a consumer champion which means that at its centre are the people it is set up to serve.

Measuring Impact

There are two ways in which HW measures impact:-

- Has the individual's experience of health and social care services improved?
- Has there been any service design/delivery change based on HW information/recommendations?

There are many records held where HW has had a huge impact on individual's experiences but it is difficult to measure HW impact at a service design/delivery level as it has representation at many stages. HW shares information with Commissioners and Providers at both a strategic and operational level. This information should be included in the consultation, planning and reviewing stages.

To demonstrate this fact; HW conducted an Enter & View visit to the Surgical Assessment Unit (SAU) at WUTHFT. HW recorded that patients were being sent to SAU inappropriately and observed that there were, occasional, long waits for Consultants. HW supported the proposal to recruit further Emergency Consultants to improve patient flow, admission to the appropriate ward and reduced the number of bed moves.

Ensuring Every Voice is heard

HW Staff, and volunteers, attend meetings, events, group sessions and, on occasion, walk up and down streets talking to residents in targeted areas. We have also set up our stand in shopping centres and on New Brighton promenade. HW Outreach programme includes two well established sessions every Monday (all day) and Friday (morning) in Moreton, and West Kirby, One Stop Shop and Tesco's in Bidston.

HW has built a very strong relationship with the Deaf Health Champions this year. We have gathered patients' stories and experiences and these have been shared with WUTHFT who are working with us to design a universal Communication Card.

HW has Healthwatch Champions who act as "Roving Reporters". The HW Champions collect information, about Health and Social Care, from their Street, Organisation, Group or GP etc. and we are hoping to work with the CCG to combine the Healthy Wirral Champion with Healthwatch Wirral Champion to eliminate duplication and confusion.

Influencing

HW produces reports on all activity and, where available, triangulates information with other sources of data/information, such as the JSNA, to provide a wider picture.

HW is represented on the Health and Wellbeing Board, the CCG Board, the CT Board, the Quality Surveillance Group and other groups within each of the provider Trusts. At these meetings, we are able to share findings ensuring the voice of the public is heard at the highest level.

Signposting

We provide signposting by referring people to websites such as Wirral Well and through established relationships. Our staff team live, work and access services on Wirral so have a considerable understanding and knowledge of what is available, or not. We aim to respond to calls/emails within 24 hours of first contact and we also contact people at a later stage to evaluate.

Scrutiny

HW Enter & View programme is developed based on feedback from the public and sometimes from a staff member at a Care Home or Ward. HW attends the RAG group meeting where each individual Care Home is discussed with the Quality Leads from DASS. HW has been asked by WUTHFT, and some Care Homes, to visit to provide assurances pre CQC inspections.

Current Work programme:-

<ul style="list-style-type: none"> • Dentistry • E&V activity • Healthy Wirral • Pressure Ulcers • Emergency Department 	<ul style="list-style-type: none"> • Communication with Harder to Reach Groups • Mental Health • EOL and Palliative Care • Safeguarding
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HW volunteers work in Task and Finish groups and always with the support of the Staff Team. Further information relating to some of HW current work programme is below:-

DENTISTRY Target Audience	Why we chose these groups	Actions
0-5	Evidence points towards Wirral having the most U5s with fillings/dental problems	Visiting Schools Reception Year Parents - are children registered with Dentists? - have they visited the Dentist for routine check up?
16-19	NHSE reports that 15-19 are less successful in getting a Dental appointment	Wirral Met - survey to ask are you registered with a dentist? have you visited within last 6 th months, 12months or not at all?
BME groups	Public health England report says that BME groups are less successful getting a dental appointment	Awareness session to talk about HW and a survey (as at Wirral Met and in accessible formats)
Deaf Community	To ascertain barriers to dental appointments and communication	Undertake Survey - ensure interpreters are booked At least 3 staff members to assist with completing the survey
Aim	To find out why these audiences are experiencing difficulties	

Enter & View Programme	Why should we conduct a visit?	Who do we share the information with?	What do we do with the information?
Care Homes Hospital Wards	<p>Contact from the public to HW</p> <p>Contact from Staff to HW</p> <p>News articles</p> <p>RAG Group information</p> <p>CQC information</p>	<p>Feedback direct to the Care Service</p> <p>RAG Group</p> <p>CQC</p> <p>Feedback to the person who contacted HW</p>	<p>(Care Homes) - Inform the RAG group so that the Quality Leads place on their radar</p> <p>(Hospital) - give direct feedback on the Ward</p> <p>Share with the CCG at the Quality and Safety Meeting</p> <p>Make recommendations for improvement/change direct to the Care Home/Hospital</p> <p>Encourage CQC to call if there are any concerns</p> <p>Refer to Safeguarding, when appropriate</p>

Task & Finish	Actions
Healthy Wirral	<p>Attend the Healthy Wirral Engagement with People Group</p> <p>Promote the use of the already established model for Healthwatch Champions with the aim of minimising duplication with the Healthy Wirral Champions</p> <p>Be key partners in the development of integrated services by attending meetings and sharing information/data</p>

<p>Continuing Health Care Fund (CHC) (this work is still in the early stages)</p>	<p>During an outreach session, HW Champion met a lady whose husband had Locked In Syndrome and they were struggling to access CHC.</p> <p>HW was able to support the lady in gaining CHC and their lives have considerably improved.</p> <p>HW Wirral Monitoring is shared with the CCG, NHSE etc. NHSE found the story and wanted HW Wirral to be part of the national plan to improve the experience of patients who may (or may not) be eligible for CHC.</p> <p>The lady presented to a large NHSE audience in Manchester, accompanied by HW Wirral</p>
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Recommendation to Family and Wellbeing Policy and Performance committee:-

HW noted that there are considerable concerns about the onerous process for families when being assessed for CHC.

HW recommends that the Family and Wellbeing Policy and Performance Committee support, and promote, the work of HW to improve the experience of individuals and families being assessed for CHC.

Update end.

WIRRAL COUNCIL

FAMILIES AND WELLBEING POLICY AND PERFORMANCE

COMMITTEE

1ST DECEMBER 2015

SUBJECT:	2015/16 QUARTER 2 DIRECTORATE PLAN PERFORMANCE MANAGEMENT REPORT
WARD/S AFFECTED:	ALL
REPORT OF:	CLARE FISH (STRATEGIC DIRECTOR OF FAMILIES AND WELLBEING)
RESPONSIBLE PORTFOLIO HOLDER:	CLLR CHRIS JONES (ADULT CARE AND PUBLIC HEALTH) CLLR TONY SMITH (CHILDREN AND FAMILIES) CLLR CHRIS MEADEN (LEISURE AND CULTURE)
KEY DECISION?	NO

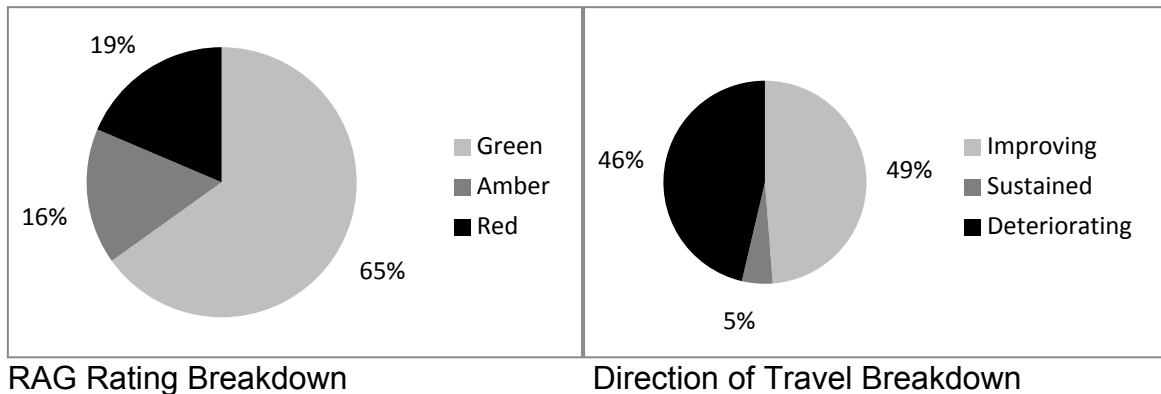
1.0 EXECUTIVE SUMMARY

- 1.1 This report sets out Quarter 2 (July – September 2015) performance against delivery of the Families and Wellbeing Directorate Plan. The Directorate Plan was reported to this committee on 23 March 2015. The performance report is attached as Appendix 1 and sets out progress against a suite of agreed key indicators and performance measures.
- 1.2 Whilst the Corporate Plan 2015/16 (and supporting Directorate Plans) have been superseded by the Wirral Plan: A 2020 Vision, they still form the basis of the in-year performance management framework. A new Performance Management Framework is being developed for the Wirral Plan once the associated delivery plan has been finalised.

2.0 BACKGROUND AND KEY ISSUES

- 1.3 The Families and Wellbeing Directorate Plan performance is reported through a set of agreed performance measures aligned to priorities identified in the plan. Performance is monitored against the targets set at the start of the year.
- 1.4 For each measure, a Red, Amber or Green (RAG) rating is assigned depending on the performance level against the target. A number of measures are annual, and these will only be reported when the data is available. The report (Appendix 1) also shows the direction of travel for each measure to illustrate whether performance is improving, deteriorating or being sustained.
- 1.5 Of the 43 reportable indicators, 28 are rated Green, 7 are rated Amber and 8 are rated Red. For indicators rated Amber and Red, the responsible officer has indicated the corrective action being put in place to get performance back on track. Of the measures where it is possible to indicate the Direction of Travel,

20 are improving, 19 are deteriorating and 2 are showing performance being sustained. The charts below show the breakdown in terms of the RAG and Direction of Travel rating breakdowns:



3.0 RELEVANT RISKS

3.1 The performance management framework is aligned to the Council's risk management strategy and has been considered as part of the Directorate planning process.

4.0 OTHER OPTIONS CONSIDERED

4.1 N/A

5.0 CONSULTATION

5.1 N/A

6.0 OUTSTANDING PREVIOUSLY APPROVED ACTIONS

6.1 There are none relating to this report.

7.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

7.1 There are none arising from this report.

8.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS

8.1 There are none arising from this report.

9.0 LEGAL IMPLICATIONS

9.1 There are none arising from this report.

10.0 EQUALITIES IMPLICATIONS

10.1 The report is for information to Members and there are no direct equalities implications at this stage.

11.0 CARBON REDUCTION IMPLICATIONS

11.1 There are none arising from this report.

12.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

12.1 There are none arising from this report.

13.0 RECOMMENDATION/S

13.1 Members are requested to note the contents of this report and highlight any areas requiring further clarification or action.

14.0 REASON/S FOR RECOMMENDATION/S

14.1 To ensure Members have the opportunity to review delivery of the Families and Wellbeing Directorate Plan.

REPORT AUTHOR: Michael Callon
Team Leader – Performance and Scrutiny
Telephone: 0151 691 8379
Email: michaelcallon@wirral.gov.uk

APPENDICES

Appendix 1 – Directorate Plan Performance Report Quarter 2 (Jul – Sep) 2015/16

SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Families & Wellbeing Policy and Performance Committee	9 July 2013
Families & Wellbeing Policy and Performance Committee	9 September 2013
Families & Wellbeing Policy and Performance Committee	28 January 2014
Families & Wellbeing Policy and Performance Committee	8 April 2014
Families & Wellbeing Policy and Performance Committee	8 July 2014
Families & Wellbeing Policy and Performance Committee	9 September 2014
Families & Wellbeing Policy and Performance Committee	2 February 2015
Families & Wellbeing Policy and Performance Committee	23 March 2015
Families & Wellbeing Policy and Performance Committee	30 June 2015
Families & Wellbeing Policy and Performance Committee	8 September 2015

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2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
Children & Young People								
0001	Rate of Referrals to Children's Social Care (per 10,000 population)	575.0	575.0	742.0	Red	730.7	↑ A number of factors have led to an under-performance against this indicator. In August, the introduction of a single point of entry for referrals has led to an increase in the number of contacts received from 700/800 to 1100/1200 per month. All contacts including those previously dealt with by the Gateway team are now processed through MASH (Multi Agency Safeguarding Hub). Over the past 4 months there has been an increase in the re-referral rate and this has also impacted on the increase in the number of referrals. There has been an increase in domestic abuse referrals from the Police to address a back log which had developed. The following actions being undertaken to improve performance: 1. A multi-agency workshop is being arranged in December to improve understanding of the threshold for referral. 2. The introduction of joint screening of all domestic abuse notifications by the Police and Children's Social Care. 3. Improved quality assurance of decision-making within Multi-Agency Safeguarding and auditing of repeat referrals. The following actions being undertaken to improve performance: 1. A multi-agency workshop is being arranged in December to improve understanding of the threshold for referral. 2. The introduction of joint screening of all domestic abuse notifications by the Police and Children's Social Care. 3. Improved quality assurance of decision-making within Multi-Agency Safeguarding and auditing of repeat referrals.	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
CSC003	Rate of Children in Need per 10,000	350.0	388.0	396.2	Green	381.4 Amber	↑ The number of Children In Need has increased due to the following: <ul style="list-style-type: none"> • There has been an increase in the rate of referrals into Children's Social Care. This is both initial referrals and re-referrals. • Within the system there remains a need, both internally and externally, for a better understanding of the thresholds for intervention and levels of need in respect of children and their families. The following actions are being taken to improve this measure: <ul style="list-style-type: none"> • Ensuring the Threshold of Need is understood internally and externally and associated correct intervention is applied rigorously. • Review Children In Need cases that have been in place longer than 6 months. • Improve the Multi-Agency Safeguarding Hub screening process. • Utilise the early help offer and ensure it is consistently applied. 	
CSC004	Rate of Child Protection Plans per 10,000 (0-17)	44.4	42.6	51.8	Green	50.9	↑	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)	
PI Ref	PI Title		Target	Actual	RAG				
CSC008 Page 111	Rate of Looked After Children per 10,000	96.2	98.2	101.0	Amber	100.3	↓	<p>The number of children entering care has been relatively stable for the past five years; however, children are remaining in care longer than in other authorities. A decreasing target has been set for this measure to bring Wirral more in line with the North West average and that of our statistical neighbours.</p> <p>The department is maintaining a tight control of the processes around children becoming looked after. There is also a focus on the following areas:</p> <ul style="list-style-type: none"> • Increasing the use of Child Protection Plans • Progressing plans for Special Guardianship Orders (SGO) • Improving the timeliness of adoptions <p>Additional social work capacity has been agreed as part of the strategy to reduce the numbers of Children in Care, with the additional capacity targeting the areas highlighted above.</p> <p>Increased legal capacity has also been arranged to progress applications through the courts. This is to meet the target timescales set.</p>	
	CSC010	The Percentage of Children in Care who have had 3 or more placements	<10.0%	<10.0%	6.0%	Green	5.8%	↓	
	CSC011	The Percentage of Children in Care who have been in placement for 2 or more years	73.0%	73.0%	76.7%	Green	76.0%	↑	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
CSC029	Average time (days) between child entering care and moving in with adoptive family, for children who have been adopted	628.0	628	387.1	Green	462	↑	<i>Two children have been adopted who waited 1261 days before moving into the adoptive family. These are the last two of a cohort of older, more difficult to place children, so it is expected that there will be significant improvement next year. Also during the last 18 months the service have developed more robust family finding, matching and tracking methods to identify placement for children in a more timely way.</i>
Page 8 of 12 CSC014	Family Intervention Service engagement with families	600	250	124	Red	600 Green	↓	Progress has been hindered by the delayed implementation of the Family Intervention Service. A re-organisation of the Family Support and Intensive Family Intervention Programme teams into a single service area through formal consultation with staff, HR and Trade Unions has delayed the launch of the new programme by approximately 3 months. By the end of November family engagement is forecast to reach 270 families and by the end of December to 380 families.
CSC015	Percentage of Children leaving care through Special Guardianship Order (SGO) or Adoption	35.0%	35.0%	38.6%	Green	39.1	↓	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
CSC016	Family Intervention Service positive outcomes with families	400	100	37	Red	400 Green	↓	Progress has been hindered by the delayed implementation of the Family Intervention Service. A re-organisation of the Family Support and Intensive Family Intervention Programme teams into a single service area through formal consultation with staff, HR and Trade Unions has delayed the launch of the new programme by approximately 3 months. By the end of November family engagement is forecast to reach 270 families and by the end of December to 380 families.
PSC017	Number of specialist targeted services early help assessment and intervention	1000	500	514	Green	1000	↓	
EDU001	Early Years % Reaching Good Level of Development	70%	70.0%	69.7%	Green	69.7%	↑	
EDU005	Key Stage 2 L4+ Reading, Writing and Maths	80%	80.0%	79.6% (P)	Green	79.6%	↑	Key Stage 2 data is provisional - revised figures will be published by Department for Education in December 2015/January 2016.

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
EDU006	The achievement gap between pupils eligible for free school meals and their peers achieving at Key Stage 2 (Level 4+ Reading, Writing & Maths)	16%	16.0%	20.7% (P)	Red	20.7%	↓	The Locality Boards have scrutinised data to determine priorities which are raising attainment of low ability free school meal pupils in reading and mathematics and more able free school meal pupils in grammar, punctuation & spelling (GPS) and writing. Schools with these issues have been identified with targeted training programmes starting in December 2015.
EDU007	The % of Looked After Children achieving Key Stage 2 (Level 4+ Reading, Writing and Maths)	55%	55.0%	56.7% (P)	Green	56.7%	N/A	<i>This is an annual measure. Membership of this cohort changes each year and therefore a 'Direction of Travel' cannot be given due to the annual variation in ability levels between pupil groups.</i>
EDU014	The % of young people aged 16-18 who are not in Education, Employment or Training (NEET)	4.5%	9.8%	7.3%	Green		↑	<i>It is not possible to provide a Year End Forecast at Quarter 2 due to the nature of the calculation used for this measure. Although data is collected monthly, government targets are set annually based on three monthly snapshots at the end of November, December and January each year. A Year End Forecast will be available at Quarter 4.</i>
EDU015	the % Care Leavers in Employment, Education or Training	49.0%	49%	50.0%	Green	51.0%	↓	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
CSC018	% of families with an under 5 living in the most 0- 20% most deprived SOA's that are registered with a Children's Centre	90%	84%	78.6%	Amber	85% Amber	↓	<p>The service is currently in a period of transition as a result of restructuring Children's Centres and Early Years into the Early Childhood Service. The service review is currently in a period of formal consultation with staff, HR and Trade Unions. Whilst in this period of transition progress towards achieving the target has stalled.</p> <p>The service re-design will give greater priority to target groups and will align delivery with wider Targeted Services areas to enable more proactive engagement in Children's Centres and registration with a larger cohort of targeted families.</p>
CSC019	% of families with an under 5 living in the 0 - 20% most deprived SOA's who have sustained contact with a Children's Centre	50%	30%	24.1%	Red	45.0%	↓	<p>The service is currently in a period of transition as a result of restructuring Children's Centres and Early Years into the Early Childhood Service. The service review is currently in a period of formal consultation with staff, HR and Trade Unions. Whilst in this period of transition progress towards achieving the target has stalled.</p> <p>The service re-design will give greater priority to target groups and will align delivery with wider Targeted Services areas to enable more proactive engagement in Children's Centres and registration with a larger cohort of targeted families.</p>
CSC020	Take up of 2 year old offer by eligible families as identified by the DWP	85%	75%	74.0%	Green	85.0%	↑	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
CSC021	Increase take-up of Children's Centre services for Children Looked After, Children in Need and Children subject to a Child Protection Plan	95%	80%	76.8%	Green	88% Amber	↓	The service is currently in a period of transition as a result of restructuring Children's Centres and Early Years into the Early Childhood Service. The service review is currently in a period of formal consultation with staff, HR and Trade Unions. Whilst in this period of transition progress towards achieving the target has stalled slightly. Closer collaboration with Specialist Services and the wider community offer is required to ensure that Early Childhood Services are accessed by those children and families who are most vulnerable.
CSC022	% children's social work staff receiving monthly supervision	85%	85%	94.0%	Green	87.0%	↑	
Adult Social Services								
ADDP02	Increase the number of apprenticeships / traineeships available within the company (LATC)	10	2	6	Green	10	N/A	
ADDP03	Increase the number of people with learning disabilities who have access to employment and training opportunities	4	3.4	3.8	Green	4	↑	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADDP04	Increase access to services to include non-Fair Access to Care Service eligible customers	25	n/a	n/a	n/a	N/A	N/A	<i>This measure is related to the development of Wirral Evolutions in terms of its business development to widen its customer base. This will be managed through the on-going contract management arrangements with the Company.</i>
ADDP05	Proportion of adults with a learning disability who live in their own home or with their family	88%	87%	84%	Green	88%	↑	
ADDP06	Permanent Admissions of younger adults (18-64) to residential and nursing care homes, per 100,000 population	15.4	15.4	14.9	Green	15.4	↓	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADCP07	Permanent Admissions of older people (65+) to residential and nursing care homes, per 100,000 population	696.9	724.9	762.5	Amber	696.9	↓	<p>The year to date target has been exceed by 10 placements. The department is seeing significant additional pressures due to self-funders falling below the support threshold, the total number of people requiring support to date in 2015/16 is 40 compared to a total of 37 across the whole of 2014/15.</p> <p>The additional Intermediate Care / Transitional beds commissioned with effect from 1st September will impact on the use of long term beds. Performance continues to be scrutinised at monthly locality performance surgeries.</p>

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADP08	Average monthly bed days lost due to delayed transfers of care per 100,000 population	75	75	84	Red	75	↑	<p>Intermediate Care / Transitional Bed capacity has now increased from the 1st September which will support discharge arrangements. The Multi-Disciplinary Team is now operating 8 to 8 Mon-Fri and 9 to 5 Sat-Sun. Ongoing work is being undertaken to develop a comprehensive 7 day service.</p> <p>Specific delays continue to be highlighted via a daily teleconference so that action can be taken to reduce delays and address any blockages. This is attended by staff from both the NHS and Social Care.</p> <p>Electronic referrals are due to be launched across some wards in October with a rollout across all wards planned. This will streamline communication flows supporting quicker decision making and subsequent patient discharge. This will be complimented by the appointment of a new Integrated manager who is due to commence in November.</p> <p>The Emergency Care Improvement Plan (ECIP) has now been agreed and an Integrated Discharge Team (IDT) improvement plan has also been drawn up with a number of quick wins identified which will be implemented by December and longer term redesign work has also begun.</p>
ADCP11	Proportion of new requests for support resolved by advice and information	50%	50%	55%	Green	54%	↔	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADDP12	Proportion of new requests for support resulting in long term services	10%	10%	3.8%	Green	5%	↑	
ADDP13	Improving people's experience of integrated care (service user experience questionnaire)	95%	95%	58.1%	Red	60%	↓	<p>Performance will be discussed with individual providers via monthly catch up meetings with the Multi Disciplinary Teams (MDTs). The focus will be on identifying and understanding whether there are core issues that are impacting on the overall experience of the patient during their period of reablement. Patient perceptions that the MDT isn't working well together could be affected by a number of reasons such as communication issues or staff / therapy shortages.</p> <p>Action plans will be agreed with the MDTs / providers to address underlying problems and these action plans will then be monitored on a monthly basis to ensure patient experience is improving and to serve as a means of identifying future issues at an earlier stage.</p>
ADDP14	Reduction in unplanned admissions	3.5%	3.5%	3.5%	Green	3.5%	↑	
ADDP15	Number of people referred to the ICCTs with integrated care recorded	95%	95%	-	-	-	N/A	<i>Performance data not yet available</i>

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADCP16	Proportion of people who have received short term services to maximise independence requiring no ongoing support	75%	75%	78%	Green	77%	↑	
Page 121 ADDP17	Percentage of people discharged from hospital into reablement/ rehabilitation still at home after 91 days	90%	90%	85%	Amber	90%	↓	<p>Wirral remains above both the national and regional average in relation to performance against this measure. There is increasing pressure on Social Care services to support earlier hospital discharges which means those people being discharged into reablement services will often present with complex health conditions thereby increasing the potential that people may be re-admitted to hospital or require ongoing bed based support. Of the 103 people identified as not being at home 91 days post discharge 42 people (42%) had subsequently passed away with a further 20 people (20%) having been readmitted to hospital. This readmission rate is reflective of the overall readmission rate within 30 days in Wirral which was 18.6% on the latest published AQUA data, Wirral has the joint 7th highest readmission rate within 30 days out of the 23 North West authorities.</p> <p>Ongoing work with reablement providers to ensure individuals are supported to reach optimum levels of independence and are supported with appropriate levels of support post reablement.</p>




2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
ADDP18	Number of episodes of Reablement /intermediate care intervention for clients aged 65 and over, per 10,000 population	480	464.5	425.6	Amber	480	↓	Wirral had the 4th highest number of people aged 65+ who received reablement during 2014/15 within both the North West and against its statistical peers, in recognition of the significance of this area and the importance of growing our reablement service we had set an ambitious growth target of 10% in 2015/16. Additional Intermediate Care bed capacity introduced from 1st September will result in additional reablement activity.
Public Health								
PHCP01	Rate of attendance at A&E for injury and assault where alcohol was a factor. PHOF 2.18: Alcohol-related admissions to hospital.	820	820	727.02	Green	820	↑	<i>Reporting period Sept 14-Aug 15</i> Performance continues on a positive downward trajectory, one that it has generally sustained for the last two years. This is to be welcomed, and further work is planned to get a better understanding of the factors that may be driving this downward, so that this can be sustained.

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
PHCP02	NHS Health Check programme by those eligible – Health Check offered (PHOF 2.22i)	20%	5%	14.7%	Green	20%	↑	<p><i>Reporting period Apr 15- Sept 15</i></p> <p>It has recently become apparent that there are problems with the validity of the quarterly uptake figures owing to the incorrect recording/analysis of 'invitations offered'. A review of data validity is currently underway and figures will be updated accordingly. However, variability in practice performance remains a key challenge.</p>
PHCP03	NHS Health Check programme by those eligible – Health Check take up (PHOF 2.22ii)	55%	55%	30.6%	Red	55%	↑	<p>Actions to address performance issues include:</p> <ul style="list-style-type: none"> - Regular practical support to practices via the public health practice nurses - A pilot to test out the potential impact of Point of Care testing - Update training for frontline staff delivering health checks - Re-issuing comparative performance profiles - New publicity materials (posters, flyers, video)

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
PHCP04	Proportion of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months	10%	10%	8.90%	Amber	10%	↓	<p>Reporting period Mar 14-Feb 15 (completions) and Mar 14 - Aug 15 (re-presentations)</p> <p>After a period of sustained improvement, performance against this measure has dipped slightly. However, current performance (8.9%) still remains above the national average (7.3%). The reporting period includes the transition of the contract to a new provider and mobilisation of the new service. This has resulted in a period of substantial change and service disturbance, with a reduction in the number of people completing treatment in February and March being noted. It is likely the reduced number of successful treatment completions is a factor in bringing performance down and performance is likely to dip as transitional factors work their way through the process. It is anticipated this could be the case for a further 3 or 4 months before the new service is able to perform to the expected standard. A more complete picture of the progress of the new service will not emerge until January 2016.</p>
PHCP05	Proportion of non-opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months	53%	53%	46.9%	Amber	53%	↓	<p>Reporting period Mar 14 - Feb 15 (completions) and Jan 14 - Aug 15 (re-presentations)</p> <p>The performance of this indicator has shown a reduction since the previous quarter but remains well above the national average of 38.7%. As above, this performance will continue to be affected by transitional factors for several more months.</p>

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
PHDP06	% of women who smoke at time of delivery: per 100 deliveries	11.5%	11.6%	10.6%	Green	11.5%	↓ <i>Reporting period Apr 15 - Sept 15</i> <i>Although there has been a slight upturn (-ve) since the September report, this indicator has now sustained improvement in performance throughout 2014/15 and has now achieved a green rating. A whole system approach to support women at the time of delivery to give up smoking has now been put into practice. The national training, 'Behavioural Support for Pregnant Smokers' which all local providers attended has also supported further development of a more integrated and streamlined approach to pregnant women to engage with Stop Smoking Services. A pilot project supporting sustained quits two months following childbirth was also mobilised (in September) with the potential for further positive impact.</i>	
PHDP07	Smoking quitters (4 weeks)	1285	318	328	Green	1285	↑ <i>Reporting period Apr 15 - Jun 15</i> <i>For 2015-16, this target has been recalculated based on NICE guidance which recommends that a specialist service helps 5% of smokers to stop smoking. In line with this recommendation the target for 2015/16 has been set at 1,285, and the system as a whole has now met this target for two consecutive months (Provisional activity (April-July) is currently at 383 with a trajectory of 634 to achieve by end of quarter two). This is to be welcomed but it should also be noted that the main provider is still struggling to meet their revised target. The re-procurement process for this whole service commenced in September and submitted tenders are now being assessed. A new contract will commence on the 1st April 2016.</i>	

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
Public Health Financial Management	Projected Public Health net expenditure for 2015-16	£30.8M	£6.4M	£13.6M	Green	30.2M	↔	Currently on target to meet our current plans. Forecast year end underspend £564,839.

2015-16 Families & Wellbeing Performance Indicators		Year End Target 2015/16	July - September (Q2)			Year End Forecast	DoT	Corrective Action (Red or Amber) Context (Green/where provided)
PI Ref	PI Title		Target	Actual	RAG			
Direction of Travel (DoT) Key			Performance Improving			Performance Deteriorating		 Performance Sustained

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WIRRAL COUNCIL

FAMILIES AND WELLBEING POLICY & PERFORMANCE COMMITTEE

1 DECEMBER 2015

SUBJECT	FINANCIAL MONITORING 2015/16 QUARTER 2 (JULY - SEPTEMBER 2015)
WARD/S AFFECTED	ALL
REPORT OF	ACTING SECTION 151 OFFICER

1 EXECUTIVE SUMMARY

1.1 This report sets out the financial monitoring information for Families and Wellbeing in a format consistent across the Policy and Performance Committees. The report aims to give Members the detail to scrutinise budget performance for the Directorate. The financial information is for Quarter 2 (July-September 2015) and was reported to Cabinet on 5 November 2015.

2 BACKGROUND AND KEY ISSUES

- 2.1 Members of the Policy and Performance Committees have previously requested that financial monitoring information is provided as a standard item at each Committee.
- 2.2 Since September 2012 regular revenue and capital monitoring reports have been submitted to Cabinet as a means of providing, detailed updates on budget performance.
- 2.3 The Coordinating Committee has agreed that in order to fulfil its corporate and strategic scrutiny role, it will continue to review the full versions of the most up to date monitor reports at its scheduled meetings.
- 2.4 The relevant sections from the most recent revenue and capital monitoring reports reported to Cabinet are summarised and updated where needed into a bespoke report for each Policy and Performance Committee. The report includes the following:
- Performance against the revenue budget
 - Performance against in year efficiency targets
 - Performance against the capital budget

3 PERFORMANCE AGAINST REVENUE BUDGETS QUARTER 2 (JULY-SEPTEMBER 2015)

3.1 Changes to the agreed Families and Wellbeing Budget for 2015-16

	Original Net Budget	Approved Budget Changes Prior Mths	Approved Budget Changes Quarter 2	Revised Net Budget
FWB - Adult Social Care	68,305	2934	-	71,239
FWB – Children & Young People,	67,964	4541	275	72,780
FWB - Further Areas: Safeguarding, Schools, Leisure, Public Health	7,956	831	-	8,787
Net Cost of Services	144,225	8,306	275	152,806

3.1.1 The approved budget changes in quarter 2 take account of the following adjustment:

- The transfer of the Liquid Logic support team from Transformation & Resources to Children & Young People (Adults having been transferred previously).

4 BUDGET VARIATIONS

4.1 The report will use RAGBY ratings that highlight under and overspends and place them into 'risk bands'. The 'risk band' classification is:

- Extreme: Overspends - **Red** (over +£301k), Underspend **Yellow** (over - £301k)
- Acceptable: Amber (+£141k to +£300k), Green (range from +£140k to - £140k); Blue (-£141k to -£300k)

4.2 2015/16 Projected Budget variations £000's

Directorates	Revised Budget	Forecast Outturn	(Under) Overspend Quarter 2	RAGBY Class	Change from prev
FWB - Adult Social Care	71,239	73,649	2,410	R	-21
FWB – Children & Young People	72,780	74,580	1,800	R	-200
FWB - Further Areas: Safeguarding, Schools, Leisure, Public Health	8,787	9,037	250	A	250
TOTAL	152,806	157,266	4,460		29

4.3 **Adult Social Services**

The current forecast remains a £2.4 million overspend mainly from demand pressures within Community Care. A number of projects are being supported by the Improvement and Transformation Team and saving plans and profiles are continuously being reviewed following action taken. Actions included:

- A programme of targeted reviews of care packages is being undertaken, including joint reviews with NHS colleagues.
- A new 'asset based' assessment framework has been implemented to determine need.
- The Liquid Logic case management system has been implemented and the support structure consultation agreed. This will streamline work processes and increase efficiency.

The transformation of day services is progressing at pace, the Local Authority Company will commence 1 December 2015. The Implementation Board is overseeing the review of financial delivery targets.

On 6th March 2014, the government announced it would close the Independent Living Fund (ILF) and ILF users transferred to Local Authority support with effect from 1 July 2015 from the Department of Work and Pensions. The Department for Local Communities and Government has awarded Adult Social Care a grant of £1.3 million to cover this expenditure for the period 1 July 2015 to 31 March 2016 and reviews have been undertaken to ensure this is sufficient to cover the additional costs that will be incurred. Any funding for subsequent years will be determined as part of the Spending Review.

4.4 **Children and Young People**

The forecast overspend has reduced to £1.8 million Reduced spend of £0.4 million has been identified across various budget headings including childrens centres. There are however increased costs of £0.2 million mainly from an increase in Special Guardianship numbers.

Actions being taken to reduce the overspend include:-

- A detailed review of all residential care and independent fostering placements
- A weekly Access to Resources panel to consider and approve all new care packages for children.
- Assessments are being undertaken to determine entitlement to Primary and Secondary transport with notification of any changes to parents by half term
- A rolling programme of recruitment to Social Work positions. The Social Worker Progression Framework has been implemented. Agency numbers reviewed on a monthly basis.

- Implementation of new Children’s Centres structures

In August the Youth Justice Board issued consultation regarding a proposed 5% in year reduction of grants paid to local authorities. This has since been confirmed and the impact on Wirral is a £70,000 grant reduction Measures have been put in place to mitigate any in year reduction through the non-filling of vacant posts.

4.5 Leisure Services

The forecast overspend is currently £250,000. This figure reflects slippage in budget savings. There are ongoing discussions and plans with regard to savings in 2016/17.

4.6 Public Health

The Chancellor’s proposals to reduce in year the Public Health Budget has been confirmed and there has been a grant reduction of £1.9m. This had been anticipated in commissioning decisions earlier in the year and has been managed from savings within retendered contracts.

5 IMPLEMENTATION OF SAVINGS

- 5.1 The delivery of agreed savings is key to the Council’s financial health and is tracked at both Council and Directorate level. The Budget for 2015/16 included £38 million of efficiency measures. It was recognised that the delivery of savings, particularly within Adults and Children’s Services was challenging being more of a transformational / change nature. In determining the level of General Fund balances the risk of slippage / non-delivery was assessed at £7.2 million.

Families and Wellbeing Budget Implementation Plan 2015/16 (£000’s)

BRAG	Number of Options	Approved Budget Reduction	Amount Delivered at Q2	To be Delivered
B - delivered	6	6,785	6,785	0
G – on track	7	2,770	1,815	955
A - concerns	14	5,609	1,769	3,840
R - high risk/ not achieved	1	10	0	10
Total at Quarter 2 2015-16	28	15,174	10,369	4,805

- 5.2 Cabinet 27 July agreed that £9.6 million of savings (of which £7.6 million related to this directorate) be reprofiled into 2016/17. This was funded from the use of earmarked reserves (including £3.4 million from the Families and Wellbeing reserve which was established for this purpose) and General Fund balances. The approved budget reduction for the Directorate is therefore £15.2m

At the time of writing £4.8m of savings still need to be delivered and there are concerns over £3.8m. These include:

- Plans around the reduction of Looked After Children, where numbers, have not reduced as planned, particularly those in high cost placements.
- The Disability Service review
- Adult Day Services – the remaining savings following restructure
- Cost of care and extra care to avoid residential packages

Action is being taken in all cases to implement these savings. In some areas however they are contributing to the cost pressures described in para 4.3 to 4.5 above.

6 PERFORMANCE AGAINST CAPITAL BUDGETS QUARTER 2 (JULY-SEPTEMBER 2015)

6.1 Capital Programme 2015/16 at end of Quarter 2 (30 September)

	Capital Strategy	Revisions Since Budget Cabinet	Revised Capital Programme	Actual Spend September 2015
	£000	£000	£000	£000
Families – Children	8,517	2,287	10,804	3,083
Families – Adults	8,263	-2,946	5,317	517
Families – Sport & Rec	1,865	810	2,675	1,164
Total expenditure	18,645	151	18,796	4,764

Note: Further detail of the schemes is contained within Annex 1.

6.2 Children and Young People

The largest element of the programme relates to school remodelling condition and modernisation works.

Practical completion is expected over the next few weeks in respect of the additional classrooms and other works at Elleray Park.

Wirral Youth Zone. Within the revised Children & Young people Capital Programme a sum of £500,000 has been identified as a potential contingency sum to support the delivery of the project.

6.3 Adult Social Services

Transformation of Day Services is ongoing. At this stage the overall scheme is still being developed. The programme is based on the level of grant funding available deferring the requirement for Council resources by £0.5 million.

The Liquid Logic Case management system has been implemented across Families and Wellbeing.

6.4 Sport and Recreation

Tenders have been invited for the integrated accommodation works at West Kirby Marine Lake and the majority of the expenditure will be incurred in 2016/17.

The re-roofing of the Tennis Centre is currently at the tendering stage and a preferred contractor has still to be chosen.

Works at Guinea Gap are now complete and, along with the 3G pitches and fitness suite, have seen an increased usage of the facilities.

7 RELEVANT RISKS

7.1 There are none relating to this report.

8 OTHER OPTIONS CONSIDERED

8.1 All options to improve the monitoring and accuracy of budgets will be considered.

9 CONSULTATION

9.1 No consultation has been necessary in relation to this report.

10 OUTSTANDING PREVIOUSLY APPROVED ACTIONS

10.1 There is an ongoing requirement to identify actions to mitigate the forecast overspend.

11 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS

11.1 There are no implications arising directly from this report.

12 RESOURCE IMPLICATIONS: FINANCIAL, IT, STAFFING AND ASSETS

12.1 In respect of the Revenue Budget the Families and Wellbeing Directorate is projecting a £4.46m over spend as at the 30 September 2015.

13 LEGAL IMPLICATIONS

13.1 There are no implications arising directly from this report.

14 EQUALITIES IMPLICATIONS

14.1 The report is for information and there are no direct equalities implications at this stage.

15 CARBON REDUCTION AND ENVIRONMENTAL IMPLICATIONS

15.1 There are no implications arising directly from this report.

16 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

16.1 There are no implications arising directly from this report.

17 RECOMMENDATIONS

- 17.1 Members are requested to review the information presented to determine if they have any specific questions relating to the budget for the Families and Wellbeing Directorate.

18 REASONS FOR THE RECOMMENDATIONS

- 18.1 To ensure Members have the appropriate information to review the budget performance of the directorate.

REPORT AUTHOR Peter Molyneux
Telephone (0151) 666 3389
E-mail petemolyneux@wirral.gov.uk

APPENDICES

Extracted from the Capital Monitoring report to Cabinet on 5 November 2015:-
Annex 1 Revised Capital Programme and Funding 2015/16

SUBJECT HISTORY

Council Meeting	Date
Monthly financial monitoring reports for Revenue and Capital have been presented to Cabinet since September 2012.	

Annex 1 Revised Capital Programme

	Revised Programme £000	Spend to Date £000	Council Resources £000	Revenue/ Reserves £000	Grants £000	Total Funding £000
Families and Wellbeing - CYP						
Elleray Park Special School redevelopment School remodelling/additional classrooms (Primary Places)	850	674	850	-	-	850
Condition/Modernisation	2,050	173	1,800	-	250	2,050
Basic Need allocation	4,658	1,441	-	-	4,658	4,658
Children's centres	1,897	243	-	-	1,897	1,897
Aiming Higher	53	-	-	-	53	53
Youth Capital	24	53	-	-	24	24
Birkenhead High Girls Academy	149		98	-	51	149
Funding for 2 year olds	80	157	-	69	11	80
Universal Free School Meals	18	-	-	-	18	18
Somerville Mobile Replacement	209	32	-	-	209	209
Family Support Scheme	366	164	366	-	-	366
Youth Zone	200	54	200	-	-	200
Stanley Special - additional classrooms, medical/hygiene provision	100	92	100			100
	150	-	150	-	-	150
	10,804	3,083	3,564	69	7,171	10,804

Families and Wellbeing - DASS	Revised Programme £000	Spend to Date £000	Council Resources £000	Revenue/ Reserves £000	Grants £000	Total Funding £000
Citizen and Provider Portal for Social and Health Services	617	-	-	-	617	617
Transformation of Day Service	615	173	-	-	615	615
Integrated IT	1,085	344	1,000	-	85	1,085
Community Intermediate Care Services	1,000	-	-	-	1,000	1,000
Integrated Social Care and Health Learning Disability Service - Girtrell Court	2,000	-	2,000	-	-	2,000
	5,317	517	3,000	-	2,317	5,317

Families and Wellbeing - Sports & Recreation

West Kirby Concourse Fitness Suite	112	-	112	-	-	112
Guinea Gap 3G Football pitches	99	-	99	-	-	99
West Kirby/Guinea Gap/Europa Pools	2,024	1,164	2,024	-	-	2,024
Refurb of Artificial Turf Pitch & perimeter fence repairs at the Tennis & Sports Centre	240	-	240	-	-	240
West Kirby Marine Lake – Integrated accommodation and service delivery	100	-	100	-	-	100
Bidston Tennis Centre re-roofing	100	-	100	-	-	425
	2,675	1,164	2,675	-	-	2,675

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WIRRAL COUNCIL

FAMILIES AND WELLBEING POLICY & PERFORMANCE COMMITTEE

1ST DECEMBER 2015

SUBJECT:	<i>COMMITTEE WORK PROGRAMME</i>
REPORT OF:	<i>THE CHAIR OF THE COMMITTEE</i>

1.0 EXECUTIVE SUMMARY

1.1 This report updates members on progress towards delivering the work programme for the Families and Wellbeing Policy & Performance Committee as agreed for the 2015/16 municipal year. There is also an opportunity for members to review the programme for the new municipal year.

2.0 BACKGROUND AND KEY ISSUES

- 2.1 The Families and Wellbeing Policy & Performance Committee is responsible for proposing and delivering an annual work programme. This work programme should align with the corporate priorities of the Council and be informed by service priorities and performance, risk management information, public or service user feedback and referrals from Cabinet or Council.
- 2.2 In determining items for the Scrutiny Work Programme, good practice recommends the following criteria could be applied:
- Public Interest – topics should resonate with the local community
 - Impact – there should be clear objectives and outcomes that make the work worthwhile
 - Council Performance – the focus should be on improving performance
 - Keeping in Context – should ensure best use of time and resources
- 2.3 The current work programme is made up of a combination of scrutiny reviews, standing items and requested officer reports. This provides the committee with an opportunity to plan and regularly review its work across the municipal year. The current work programme for the Committee is attached as Appendix 1.

3.0 SCRUTINY REVIEWS - UPDATE

3.1 Safeguarding Children Scrutiny Review
This review is now nearing completion. The evidence-gathering sessions have concluded, Members have assessed the evidence and the draft report is now produced. A meeting is due to be held with senior officers and the portfolio holder prior to the report being included on the Committee agenda for 19th January.

3.2 Avoiding Admissions Scrutiny Review

Committee has previously agreed to undertake a task & finish group review of the impact of enhanced community-based care provision on the level of admissions to acute hospital settings. Members of the task & finish group are Councillors Moira McLaughlin (Chair), Bruce Berry, Alan Brighthouse, Treena Johnson and Denise Roberts. The scope of the review has now been agreed and a number of evidence-gathering sessions have been held. These include visits to three care homes which provide intermediate care beds, a visit to the Rapid Community Support team at Claughton Medical Centre and a visit to the Integrated Care Coordination Hub at Eastham. A series of other meetings and visits are planned prior to the expected completion of evidence-gathering by the end of January 2016.

3.3 Ready for School Scrutiny Review

It is proposed that a new review relating to children being ready for school will commence shortly. Members are requested to nominate the membership for this task & finish group.

4.0 'FOCUS ON.....' SESSIONS

4.1 During the previous municipal year, members held Spotlight sessions, which, in an informal setting, enabled topics to be explored in greater detail than time would allow during the formal Committee meeting. It is proposed that further sessions will be arranged during the current municipal year and will be referred to as 'Focus on

4.2 No further sessions have been held since the previous Committee meeting on 8th September.

4.3 Since the previous Committee meeting on 8th September, the following adjustments to the plans for 'Focus On' Sessions have been made:

- All-age disability (Clare Fish / Julia Hassall) – This session will no longer be provided as the All-age disability strategy will be included on the Policy & Performance Committee agenda on 1st December.
- Mental Health (Clare Fish) – This session will be more appropriate later in the municipal year.
- Implementation of the Care Act: update (Graham Hodgkinson) – To be arranged
- Wirral Community Trust (WCT): update – The Trust has requested an opportunity to speak to members regarding the services delivered by WCT and their plans for future delivery. The new Chief Executive, Karen Howell has recently taken up her position with the Trust and will attend the session. It has been agreed that a 'Focus On.....' session will be the most appropriate forum for this. It is hoped to arrange a date shortly.

5.0 REPORTS DISTRIBUTED TO MEMBERS SINCE THE LAST COMMITTEE MEETING

5.1 In order to reduce the number of agenda items at meetings, some reports will be distributed to Committee members outside the committee schedule. In order to maintain public transparency, all reports dealt with in this way will be highlighted in this report.

5.2 Since the last Committee meeting on 8th September 2015, no reports have been distributed to members in this way.

6.0 CHILDREN SUB-COMMITTEE

- 6.1 The first meeting of the Children Sub-Committee during the current municipal year was held on 23rd September 2015. The minutes from that meeting are reported as a separate item on this agenda.
- 6.2 The next meeting of the Children Sub-Committee is scheduled for 16th December 2015. Items on the agenda will include:
- Complaints report for Children's Services
 - School standards report – attainment at GCSE and A Level: 2015
 - Post 16 qualifications and the impact on NEETs

7.0 HEALTH & CARE PERFORMANCE PANEL

- 7.1 Previous meetings of the Health & Care Performance Panel were held on the 28th September and 25th November. Report from those meetings can be found as a separate item on the agenda for this meeting.

8.0 CARE QUALITY COMMISSION (CQC) – INSPECTIONS OF LOCAL HEALTH PROVIDERS

- 8.1 As previously reported, an inspection of Cheshire and Wirral Partnership NHS Foundation Trust was planned to take place towards the end of June 2015. To date, no report has been published by the Care Quality Commission (CQC).
- 8.2 Also, as previously reported, an announced inspection of Wirral University Teaching Hospital Foundation Trust took place in September 2015. To date, no report has been published by the CQC.
- 8.3 CQC has announced that a planned inspection is due to take place of the services provided at Murrayfield Hyperbaric Chamber, Wirral. This inspection is due to take place on 25th November.

9.0 WIRRAL PLAN WORKSHOPS

- 9.1 Members will be aware that three workshops were held in early November to enable members to consider the delivery of the Wirral Plan. The workshops covered each of the three themes: People, Business and Environment. The outcomes of the workshops will be consolidated into a single report and presented to a meeting of the Coordinating Committee on 10th December 2015.

10.0 PROGRESS IMPLEMENTING PREVIOUS RECOMMENDATIONS

- 10.1 No further updates are currently available.

11.0 RECOMMENDATIONS

11.1 Members are requested to approve the updated Families and Wellbeing Policy & Performance Committee work programme for 2014/15 as shown in the appendix, making any required amendments.

11.2 Members are requested to nominate the membership for the Ready for School task & finish group.

REPORT AUTHOR: **Alan Veitch**
Scrutiny Support
0151 691 8564
email: alanveitch@wirral.gov.uk

2015-16 Families and Wellbeing Policy & Performance Committee - Work Programme

Updated - 18/09/2015

(including Children Sub-Committee and the Health & Care Performance Panel)

Key Activities	Lead Member / Officer	Reason for Review	May 2015	June 2015	July 2015	Aug 2015	Sept 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	April 2016	Outcome
Committee Dates				Tues 30th			Tues 8th		Mon 2nd	Tues 1st	Tues 19th		Tues 8th		
Scheduled Reviews															
Safeguarding Children	Cllr Moira McLaughlin	Agreed by P&P Committee on 5th Dec 2013									Committee report due				Commenced July 2014. To complete.
Reducing hospital admission and dependency on nursing and residential home for older people (To be known as the Avoiding Admissions review)	Cllr Moira McLaughlin	Agreed by P&P Committee on 2nd February 2015													12/08/14 - Spokespersons agreed to prioritise this review for early 2015. 02/02/15 - Committee agreed to establish a Task & Finish Group to work during the 2015/16 municipal year.
Early Years / Children's Centres		Agreed by P&P Committee on 20th March 2015													
Budget options	Cllr Moira McLaughlin	Part of the Council's budget process													
Wirral Plan - Development of delivery plan	Cllr Moira McLaughlin	Proposed by Spokespersons, 21st July													Workshops held in November 2015. Report to Coordinating Committee on 10th December 2015.
Impact Report from previous In-depth Reviews															
Learned After Children Review															Committee (02/12/14) requested future progress report in Dec 2015
Implications of the Francis Report for Wirral															12/08/14 - Spokespersons agreed to refer this item to the Health & Care Performance Panel. A report was presented to the Panel on 20/10/14. Future updates will be provided.
Quality Assurance and Standards in Care Homes															12/08/14 - Spokespersons agreed to refer this item to the Health & Care Performance Panel. A report was discussed by the Panel on 19/11/14. Future updates will be provided.
Reports Requested to Committee															
School Traded Services - proposed changes to service delivery	Clare Fish / David Armstrong														Committee (02/12/14) requested future progress updates, which will be provided in 2015/16 municipal year.
Safeguarding Children Annual Report 2014/15	Simon Garner														Complete
All-age Disability Strategy	Julia Hassall / Graham Hodkinson														Deferred until 2015/16 municipal year
Child Poverty Strategy - update	Julia Hassall														Committee (02/02/15) requested future updates re effectiveness of the child poverty strategy.
Disability service for children: budget option - progress report	Julia Hassall	Agreed by Spokespersons, 24th Feb 2015													Deferred from 2014/15 municipal year
CRI - Follow-up from Spotlight session on 21st Jan 2015															01/10/15 - Spokespersons agreed to refer this item to the Health & Care Performance Panel.

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Key Activities	Lead Member / Officer	Reason for Review	May 2015	June 2015	July 2015	Aug 2015	Sept 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	April 2016	Outcome
Public Health Annual Report - 2014	Fiona Johnstone	Agreed by Spokespersons, 4th June 2015													Complete
Draft protocol to promote more effective working between Health & Wellbeing Board, Healthwatch and health scrutiny	Clare Fish	Agreed by Spokespersons, 4th June 2015													Draft protocol approved by F&W P&P on 30/07/15. Also approved by Healthwatch board. Awaiting approval from Health & Wellbeing Board
Healthwatch Wirral - update (including Annual Report)	Karen Prior														
Day centres and the establishment of Wirral Evolutions - progress report	Chris Beyga	Agreed by P&P Committee, 8th Sept 2015													
Childcare Bill - update	Julia Hassall	Agreed by Spokespersons, 3rd Sept 2015													01/10/15 - Spokespersons agreed to remove this item from the work programme.
Adults Safeguarding Annual Report	Bernard Walker / Simon Garner	Agreed by Spokespersons, 1st October 2015													
Meeting the housing needs of vulnerable people	Graham Hodgkinson / Ian Platt	Agreed by Spokespersons, 1st October 2015													
Impact of the reduction in funding for public health	Fiona Johnstone	Agreed by Spokespersons, 1st October 2015													
Reports to be distributed to Members for information															
Planning Annual Report	Julia Hassall / Simon Fisher														Outstanding
Adoption Annual Report	Julia Hassall / Simon Fisher														Outstanding
Health & Wellbeing Strategy	Fiona Johnstone														
Local Government Declaration on Tobacco Control - update	Julie Webster	Agreed by Spokespersons 7th January 2014													Complete
Referrals from other Committees															
NOM - Local Government Declaration on Tobacco Control	Fiona Johnstone	Agreed by P&P Committee 28th Jan 2014													Member's briefing produced. Complete
NOM - Becoming a 'Dementia-friendly' Council	Proposed: Cllr Tom Anderson; Seconded: Cllr Tracey Smith	Referred from Council, 14th July 2014													Complete
NOM - Mental Health Challenge	Proposed: Cllr Tom Anderson; Seconded: Cllr Lesley Rennie	Referred from Council, 6th July 2015													Complete
Standing Items															
Performance Dashboard															
Financial Monitoring															
Policy Inform - Update															
Budget scrutiny															

Key Activities	Lead Member / Officer	Reason for Review	May 2015	June 2015	July 2015	Aug 2015	Sept 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	April 2016	Outcome
Focus On.....' Sessions															
Vanguard Project	John Develing / Jo Goodfellow / Clare Fish	Proposed by Spokespersons 4th June 2015			20th										Complete
All-age Disability Service	Clare Fish / Julia Hassall / Graham Hodgkinson	Proposed by Spokespersons 4th June 2015													01/10/15 - Spokespersons agreed to remove this item from the work programme.
Wirral Community Trust: update on service delivery	Karen Howell / Sandra Christie	Agreed by Spokespersons, November 2015									???	???			Date to be arranged
Mental Health	Clare Fish	Proposed by Spokespersons 4th June 2015													Date to be arranged in 2015/16 municipal year
Proposed implementation of the Care Act 2014	Graham Hodgkinson	Proposed by Spokespersons 4th June 2015													Date to be arranged in 2015/16 municipal year
Health Inequalities	Fiona Johnstone	Proposed by F&W P&P Committee 8th July 2014													Date to be arranged in 2015/16 municipal year
Children Sub-Committee															
Sub-Committee meetings															
							23rd			16th				30th	
Early Years and Children's centres / 'Giving Wirral children the best start in life'	Julia Hassall / Deborah Gornik	Officer report prior to possible task and finish work													
School standards report regarding outcomes for Key Stage 1, Key Stage 2, GCSE and A Levels, including impact on 'narrowing the gap'	Deborah Gornik / Sue Talbot	Officer report requested													
Children social care reorganisation	Julia Hassall / Lisa Arthey	Officer report requested													
Exception reports highlighting positive and negative aspects arising from school Ofsted inspection reports	Deborah Gornik / Sue Talbot														
Complaints report for Children's Services	Julia Hassall	Agreed by Spokespersons, 1st October 2015													
School standards report - attainment at GCSE and A Level: 2015	Sue Talbot	Agreed by Spokespersons, 1st October 2015													
Post 16 qualifications and the impact on NEETs	Julia Hassall	Agreed by Spokespersons, 1st October 2015													
Outcomes of the Wirral Council Ofsted inspection (if available)	Julia Hassall	Agreed by Spokespersons, 1st October 2015													
Visits to both high performing and under-performing schools in terms of attainment.		Proposed by Children Sub-Committee , 23/09/15													Visits to be arranged

Key Activities	Lead Member / Officer	Reason for Review	May 2015	June 2015	July 2015	Aug 2015	Sept 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	April 2016	Outcome
Health & Care Performance Panel															
Panel meetings						20th	28th		25th		12th		16th		A meeting to review the draft Quality Accounts of health partners is scheduled for Tues 10th May 2016
Care home and domiciliary care – performance report (Amanda Kelly)	Amanda Kelly	Proposed by H&CPP, 19/11/14													
The impact of changes to Out of hospital services	Jacqui Evans	Proposed by H&CPP, 01/04/15													
Preparations for winter pressures	Jacqui Evans	Proposed by H&CPP, 01/04/15													
Quality framework and performance measures for the health sector in Wirral	Lorna Quigley	Standard agenda item													
Feedback from Quality Surveillance Group	Lorna Quigley	Standard agenda item													
Francis Scrutiny review – review of recommendations	Lorna Quigley, Jill Galvani, Alan Veitch	Proposed by H&CPP, 20/10/14													
Care Homes Scrutiny Review – review of recommendations	Amanda Kelly	Proposed by H&CPP, 19/11/14													
Social care complaints report, to include domiciliary care	David Jones	Proposed by H&CPP, 04/02/15													
WUTH: Follow-up report relating to issues arising from the CQC action plan (Sept 2014)	Jill Galvani, Evan Moore, Jean Quinn	Proposed by H&CPP, 01/04/15													
WUTH: Follow-up report relating to issues arising from the Post Improvement Plan	Anthony Hassall	Proposed by F&W P&P Committee, 02/02/15													P&P Committee (02/02/15) requested future updates
WUTH: Follow-up report relating to issues arising from A&E targets		Proposed by F&W P&P Committee, 02/02/15													
Implementation of the Better Care Fund (H&CPP, 01/04/15)	Jacqui Evans	Proposed by H&CPP, 01/04/15													01/10/15 - Spokespersons agreed to remove this item from the work programme.
CQC inspection report for Cheshire & Wirral Partnership Trust (Inspection of June 2015)		Proposed by H&CPP, 20/08/15													To be arranged - once the report is available
Drug and alcohol service / CRI - performance update	Julie Webster / Gary Rickwood + CRI	Agreed by Spokespersons, 1st October 2015													
CQC inspection report for WUTH (Inspection of Sept 2015)		Agreed by Spokespersons, 1st October 2015													To be arranged - once the report is available