

Adult Social Care and Health – Quarter 1 2012-13

1.1 SERVICE DASHBOARD

Revenue budget actual variance £000 ^[1]	Capital actual variance £000	Corporate Plan Performance	Managing the Business	People Performance management	Key projects
1	37	5.5	4.5	-3	1

1.2 TOP ACHIEVEMENTS AND ACTIONS

Top 3 Achievements	Top three challenges	Actions required
<p>ASCH held a successful inaugural whole-staff conference bringing together existing staff and recently joined colleagues from Public Health. Outcomes included raised awareness on the agenda for Health and Wellbeing and reinforcing key messages from the Think Customer and Data Protection initiatives. There was a high level of positive feedback from attendees at the conference.</p>	<p>Identifying an additional £10.5m of savings in 2014/15-16 whilst ensuring the continued delivery of high-quality outcomes for residents. Nationally Adult Social Care will also need to start planning for implications arising from the White Paper <i>Caring for our future: reforming care and support</i> (July 2012), particularly the long-term funding of care.</p>	<p>The required level of savings is challenging and will require a radically different approach involving collaboration between ASCH and other directorates / partners in order to achieve financial sustainability.</p>
<p>A successful “Have Your Say Day”, hosted by the Learning Disability Partnership Board, involving 120 people including service users and family carers in order to consider future priorities for the Board. The event also saw the launch of a new service “Working for You”. This will provide people with learning disabilities and autism information, advice and</p>	<p>A smooth transition to the new Adult & Community Services Delivery Unit whilst ensuring Business As Usual.</p>	<p>Joint Children’s and Adults SMT to work in partnership with HR to produce transition plan and to communicate this to / engage all staff in the Directorate.</p>

support with a specific focus on work.		
Launch of Enablement Plus – providing an enhanced enablement service in partnership with Housing 21 and utilising funding from the NHS, so as to help achieve our objective of delaying and reducing the need for care and support.	Maintaining proactive intervention to reduce the incidence of sickness in ASCH at least comparable with the Council average.	Continued compliance with previously agreed action plan, which has now resulted in a positive direction of travel for this indicator.






1.3 SUMMARY OF THE SERVICES PERFORMANCE

ASCH continues to perform strongly across the range of Performance Indicators. The quarterly surveys of customers (CPI Number 1003 and 1006) are starting to produce some interesting results. These surveys are closely aligned to the respective work streams *My Support My Choice* and the new contract for Carers services so that any negative results directly feed into appropriate mitigating action. There was a significant improvement in the number of Performance Reviews completed with ASCH's performance strongest amongst the services. Sickness statistics, whilst relatively high, are showing a positive direction of travel and the Directorate will need to continue to be vigilant about managers applying the Council's policy on absence management. Nationally Adult Social Care will also need to start planning for implications arising from the White Paper *Caring for our future: reforming care and support* (July 2012), particularly the long-term funding of care.

ASCH has launched an internal value for money tool aligned to per capita spend on residents and customers as well as key activity indicators. This tool is reported quarterly and is designed to help which keep vfm high on the agenda of the Leadership Team.

2. DELIVERING THE CORPORATE PLAN

2.1 How the service is performing against its Corporate Plan indicators (if it has any)

CPI NO	Indicator description	Period Covered	Previous outturn	Target	Numerator and Denominator	Outturn	Target Variance	DoT Variance	Benchmarking
1001	% of people aged 65+ who are still at home 91 days after discharge into rehabilitation services	Oct 11 - Dec 11	88.5%	87%	399/451	88.5%	1.7%	 0%	Quarter 4 London Average = 86.5% (Source: LAPS)
1002	Increase the number of smoking quitters in people aged 18 years and over to 2,200 (NHS four-week smoking quitter target)	Jan 12- Mar 12	495	617	N/A	736	19.3%	 48.7%	Barnet rate per 100k aged 16+ = 560.28. London rate per 100 aged 16+ = 539.41, Apr 11 to Dec 11
1003	The proportion of service users who feel they have choice and control influencing decisions that affects them	Apr 12 - Jun 12	55.7%	56%	25/42	59.5%	6.3%	 6.9%	Local indicator - no benchmarking available. N.B. survey based on relatively small sample of customers who have had service in the preceding 3 months. PI is used to track progress against <i>My Support, My Choice</i> .
1004	Service users taking their personal budget as a direct payment	Apr 12 - Jun 12	15%	18%	648/3325	19.5%	8.3%	 29.9%	Local indicator - no benchmarking available.
1005	Decrease in younger adults of working age in residential care.	Apr 12 - Jun 12	345	328	N/A	330	0.6%	 4.3%	Local indicator - no benchmarking available.
1006	The proportion of carers who report that they are supported to sustain their caring role.	Apr 12 - Jun 12	56%	56%	29/47	61.7%	10.2%	 10.2%	Local indicator - no benchmarking available. N.B. survey based on relatively small sample of customers who have had service in the preceding 3 months. PI is used to track progress against new Provider contract for

									Carers.
1007	% of safeguarding adult cases where service users who are able and willing, report that they feel safer	This is a new indicator and will report for the first time in quarter 2. An end of year target will also be set in quarter 2.							

*The relevant previous outturn used will either be the previous quarter, or the same quarter of the previous year. The same quarter of the previous year will be used for annual indicators, cumulative indicators (where the numbers add up during the year and are reported as 'year to date') and if the indicator is affected by seasonal fluctuations.

CPI 1005

Breakdown of the Q1 outturn of 330 is shown in Table below. The relevant work stream for this CPI is entitled *Move On*. At this point in time we are expecting to achieve our overall target of 328, though the profiling of this is not necessarily even during the course of the year.

Residential & Nursing	2012/13 Month 3
PD 18-64	53
LD 18-64	213
MH 18-64	61
Other vulnerable people	3

3. RESOURCES AND VALUE FOR MONEY

3.1 Revenue

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Budget V1	Q1 Forecast 2012/13	Variation		
	£000	£000	£000	£000		
Care Services - Learning Disabilities	33,878	34,645	34,901	256	Significant savings of £1.1m are being achieved in 2012/13. Work is ongoing to manage demand and there are some negotiations still ongoing with providers to reduce costs.	0.7%
Care Services - Mental Health	7,114	6,489	6,572	83	Overspend is due to an increase in residential clients placements due to an increase in autism diagnosis.	1.3%
Care Services - Older Adults - Physical Disabilities	42,288	42,757	42,943	186	Recovery plan in place to look at pressure in PSI	0.4%
Transformation & Resources	3,855	3,513	3,392	(121)	Underspend is due to saving on interim joint Director with Children's Service	-3.4%
Strategic Commissioning & Supply Management	8,741	8,390	7,987	(403)	Savings on housing related support which will be re-directed towards lower level preventative services.	-4.8%
Government Grant Income	(61)	(61)	(61)	-		0.0%
Total	95,815	95,733	95,734	1		0.0%

3.2 Capital

	2012/13 Latest Approved Budget	Additions/ Deletions recommended to September CRC	Slippage / Accelerated Spend recommended to September CRC	2012/13 Budget (including September CRC)	Forecast to year end	Variance from Approved Budget	% slippage of 2012/13 Approved Budget
	£000	£000	£000	£000	£000	£000	%
Mental Health and Adults Personal Social Services Allocations	1,658	37	-	1,695	1,695	37	0%
Adult Social Care & Health	1,658	37	-	1,695	1,695	37	0%

4. MANAGING THE BUSINESS

4.1 How the service is managing its business

	Indicator description	Period Covered	Previous relevant outturn	Target	Numerator and Denominator	Outturn	Target Variance	DoT Variance
Finance indicators	Percentage of savings achieved	Apr 12 - Jun 12	100.0%	100.0%	4657/4657	100.0%	4.5%	n/a
	Percentage of the capital programme slipped	Apr 12 - Jun 12	91.6%	20.0%	0/1658	0.0%	100%	↔ 100%
HR	Reducing sickness absences to 6 days per employee (rolling 12 months)	Jul 11 - Jun 12	9.7	6.0	3175.46/336.01	9.5	57.5%	▲ 2.6
	Qualitative assessment of Workforce stability	Apr 12 - Jun 12	n/a	n/a	n/a	green	n/a	n/a
	Completion of individual performance reviews	Apr 11 - Mar 12	37.0%	100.0%	255/269	94.8%	5.2%	▲ 156.2
Complaints	Percentage of complaints responded to within policy guidelines (Policy)	Apr 12 - Jun 12	n/a	80.0%	1/1	100%	100.0%	n/a
	Percentage of complaints responded to within policy guidelines (Statutory)	Apr 12 - Jun 12	n/a	80.0%	11/12	91.7%	6.3%	n/a
FOI	Percentage of FOI requests responded to within 20 working days	Apr 12 - Jun 12	96%	90%	31/31	100%	11.1	▲ 4.2%

ASCH comments:

- The sickness figures, albeit relatively high is showing an improvement compared to the 2011/12 outturn and has a positive direction of travel reflecting the action plan that was implemented last financial year. ASCH will need to continue with monitoring progress, including the use of monthly HR surgeries where managers can get specific advice relating to individual cases.

4.2 Managing the business: People Performance management

Performance Indicator	Period covered	Target	Amber criteria	Q1 Actual (No.)	Q1 Actual % of total	Q1 (numerator/ denominator)	Target Variance	Q1 DoT	Council Average	Benchmarking
Attendance										
Average number of absence days per employee (Rolling year)	July 11 - June 12	6	6 - 6.5	9.5	N/A	3175.46/336.01	-57.5%	▲ 2.6%	7.5	10.1 days (CIPFA, All Members & other Unitary Authorities 2011)
Average number of absence days per employee this quarter (target is seasonally adjusted)	April 12 - June 12	1.34	1.35 - 1.47	2.2	N/A	607.08/282.34	-60.4%	▲ 6.5%	1.5	2.25 days (CIPFA, All Members & other Unitary Authorities 2011)
% managers submitting a monthly absence return	April 12 - June 12	100%	>90%	46	88.5%	46/52	11.5%	▼ 11.5%	89.1%	N/A : measure applicable to LBB only
Performance Review										
% performance reviews completed and agreed for eligible staff only	April 11 - March 12	100%	>90%	255	94.8%	255/269	5.2%	▲ 156.2%	82.8%	86% (CIPFA, All Members & other Unitary Authorities 2011)
% objectives set for eligible staff only	April 12 - March 13	100%	>90%	255	96.6%	255/264	3.4%	▲ 37%	74.6%	N/A : measure applicable to LBB only
Cost										
Variance of total paybill to budget	April 12 - June 12	£3,529,834	+/-5%	3,872,271	9.7%	3872270/ 3529833	-9.7%	▼ 369.5%	-0.4%	N/A : measure applicable to LBB only
Management Indicator	Period covered			Q1 Actual (No.)	Q1 Actual % of total	Q1 (numerator/ denominator)	DoT Q1 %		Council average	Benchmarking
Diversity Data										
Percentage of top 5% earners that are female	As at 30 June 2012			11	64.7%	11/17	0.0%		49.0%	Women in leadership posts 49.9% (CIPFA, All Members & other Unitary Authorities 2011)

Number of BME employees as % of total employees	As at 30 June 2012	117	38.9%	117/301	▲ 1.8%	32.1%	Black and Minority Ethnic local population 33.1% (State of the Borough June 2011)
Number of declared disabled staff as % of total employees	As at 30 June 2012	17	5.6%	17/306	▼ 4.1%	2.8%	2.33% (CIPFA, All Members & other Unitary Authorities 2011)

Employee Relations

High Risk - Employee Relations cases as % of total cases	As at 30 June 2012	2	18.2%	2/11	▲ 18.2%	11.5%	N/A : measure applicable to LBB only
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As at 30 June 2012	ESTABLISHED POSITIONS AS FTE		EMPLOYEES COVERING ESTABLISHED POSITIONS AS FTE			MSP RESOURCE AS HEADCOUNT	NON MSP RESOURCE AS Headcount			AVAILABLE CASUAL RESOURCE AS FTE
	Total Established Positions (FTE)*	Occupied (FTE)	Permanent	Fixed Term, Temporary, Seasonal	TOTAL	TOTAL	Resource paid in the quarter	Consultants paid in the quarter	TOTAL	Total
Adult Social Services	405.87	290.78	261.80	19.54	281.34	64	2	8	10	11.00

- % managers submitting a monthly absence return – ASCH performance was stronger in April and May; deterioration in June was due to a number of managers being on annual leave. Since then, the Performance Team has worked with these managers to retrieve the position and to remind them to set up a “substitution” on SAP to cover both planned and unplanned absences e.g. annual leave, so that colleagues can make returns when necessary.
- Performance Reviews (11/12 closure and 12/13 objectives set) – ASCH outturn was the strongest amongst all services.

4.3 Key projects

There are no red rated projects in this service in quarter 1.

4.4. Risk Overview

The following is the 5 X 5 matrix 'heat map' highlighting the number of risks at a Directorate Level and where they are currently rated:

	SCORE	IMPACT				
		1	2	3	4	5
		Negligible	Minor	Moderate	Major	Catastrophic
PROBABILITY	5 Almost Certain	0	0	0	0	0
	4 Likely	0	0	1	1	0
	3 Possible	0	2	9	4	1
	2 Unlikely	0	1	4	4	0
	1 Rare	0	0	0	0	0

Risk commentary for Adult Social Care and Health cross-referenced to the risks:

Unless otherwise stated these risks have not been escalated for monitoring at the corporate level. Risks rated 12 or above are managed by the oversight provided by monthly Leadership Team meetings.

AS0015 - This long-term risk is closely monitored. Work to ensure an accurate understanding of each parties roles and responsibilities aims to ensure this risk is more accurately understood. Once completed more effective controls will be established which should reduce the likelihood of the risk materialising.

AS0038 – In addition to progressing the joint action plan with the Income Team the billing process is being amended to secure improvements in income recovery performance.

AS0044 – The Delivery Unit Governance Group oversees the completion of the work programme to improve data protection arrangements which includes data protection briefings and work to enhance data sharing practices.

AS0053 – A compliance action plan is being progressed to enhance procurement practices.

AS0055 – Work in underway to enhance the Directorate's business continuity arrangements. This risk has been escalated for corporate level monitoring.

AS0059 – Work is underway to ensure the revised resource allocation system is robustly tested.

AS0061 – Current risk actions need supplementing to support the Directorate's management of this risk.

The following risk register lists those risks rated as 12 and above:

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Target Date (Priority)	Target Assessment Impact Probability Rating		
AS0038 - Financial Underachievement on income budget.	Major 4	Likely 4	High 16	Debt recovery process instigated Cases are referred through Income Section for recovery of fairer contributions debt. Progress is being made to address the 7 actions detailed in the joint (Financial	Treat	31/07/2012 (High)	Moderate 3	Possible 3	Medium High 9

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Target Date (Priority)	Target Assessment Impact Probability Rating		
				Assessment & Income Recovery) action plan. The work underway includes improving the monitoring of the work and queries that arise and the more timely provision of the information required by the income recovery team to initiate recovery action. In addition, work is underway with Heads of Service within Care Service Delivery to ensure residents are supported at the point care starts to be provided when they are unable, for example, to manage their own financial affairs. The use of actuals for billing purposes will be initiated. Revised billing process based on actuals. <i>In Progress</i> (50% complete)					
AS0055 - ICC Business continuity – risk that business will not continue to appropriate as normal in the event of an incident or a disaster.	Catastrophic 5	Possible 3	High 15	New Swift Support Contract <i>In Progress</i> (80% complete) Internet Protocol Telephony project This work project will provide extra resilience. <i>In Progress</i> (70% complete) SWIFT disaster recovery resilience Procurement exercise or alternative options (in-house or NSCSO) <i>In Progress</i> (25% complete) Wisdom disaster recovery resilience Possible integration with SWIFT exercise if we go down the integrated SWIFT replacement and Electronic Document Record Management System (EDRMS) route or we could provide capital to NSCSO to provide DR or we could do this in-house now. <i>In Progress</i> (2% complete) NLBP access denied resilience <i>Proposed</i> (0% complete) Business continuity review Royal Free To review the adequacy of the current	Treat	Ongoing 31/07/12 (High) Ongoing Ongoing Ongoing Ongoing	Moderate 3	Unlikely 2	Medium Low 6

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Target Date (Priority)	Target Assessment Impact Probability Rating		
				business continuity arrangements to ensure LBB staff located within the hospital can continue to meet the needs of patients during a service disruption. <i>In Progress</i> (6% complete)					
AS0015 – Financial Increases in the number of transfers from health - as they reduce continuing care payments by reviewing them and transferring to social care. 108 packages and the potential to transfer £1.1m	Major 4	Possible 3	Medium High 12	Discussions with NHS Barnet are taking place to ensure there is a consistent approach <i>In Progress</i> (75% complete) Clarification of roles and responsibilities Previous joint health and social care saving plan had to be abandoned because of change of approach at an NHS NCL level. Review of this approach is underway by NHS NCL Barnet and a shared approach to managing risk will be developed following this review. <i>Proposed</i> (10% complete)	Treat	29/03/2013 (Normal) 29/06/2012 (Normal)	Major 4	Unlikely 2	Medium High 8
AS0044 - ICC Failure to have robust data security built into our systems and ways of working. Information governance (data protection, responding to FOIs and SARs, records retention) – risks that the Directorate may not be appropriately safeguarding personal information or responding to queries from members of the public.	Major 4	Possible 3	Medium High 12	Data sharing protocol audit Audit to be undertaken of key partners to ensure the data sharing arrangements are covered by data sharing protocols. <i>Proposed</i> (0% complete) Data protection compliance action plan An action plan addressing the 11 recommendations cited in the October 2011 internal audit report is being progressed to enhance the Directorates arrangements. <i>In Progress</i> (27% complete) Review data security procedures in systems including DOLS process. <i>Under Review</i> (0% complete) New protocols to be created in line with IS strategy. Protocols to be produced in relation to who has access to our systems, what governance needs to be in place for this to	Treat	Proposed Ongoing Ongoing 30/06/2012 (Normal)	Moderate 3	Unlikely 2	Medium Low 6

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Target Date (Priority)	Target Assessment Impact Probability Rating		
				be DP compliant and a formal decision about the level of CRB check necessary before access can be granted (if any). Access to secure email facilities is to be set up for appropriate staff and protocols developed. <i>In Progress</i> (30% complete)					
AS0053 - ICC Procurement and contract management – risk of a fragmented approach to procurement which may result in non achievement of value for money or appropriate safeguards being built into contracts	Major 4	Possible 3	Medium High 12	Compliance action plan Information provided by Quality and Purchasing colleagues 9th July 2012, shows that as of 19th June 2012 the Directorate's 342 contracts combined value was £111,068,629. The number of compliant contracts was reported as being 199 and the combined compliant contract value as £85,347,811. <i>In Progress</i> (91% complete) Due diligence protocol A new provision protocol is in development to ensure due diligence is undertaken before entering into contractual arrangements with a new provider and for the suspension and termination of contractual arrangements where there is persistent performance failure or safeguarding issues. <i>In Progress</i> (31% complete)	Treat	31/05/2012 (High) Ongoing	Moderate 3	Unlikely 2	Medium Low 6
AS0059 - Financial Failure to achieve the MTFS savings target to be delivered through alignment of the Resource Allocation System (RAS). The original proposal was to develop social capital to produce 615k cashable savings within 2012/13, with further savings in 13/14 of £465k. Senior	Major 4	Possible 3	Medium High 12	Resource allocation system review Analysis of RAS to enable modelling of reduction to assess effect of current clients and then potential additional clients in the system through demographic change <i>In Progress</i> (50% complete) Develop, consult and publish operational guidance Draft guidance has been drafted and presented to the Business Improvement Board, circulated for internal consultation		03/09/2012 (Normal) 31/07/2012 (High)			

Risk	Current Assessment Impact Probability Rating			Control Actions	Risk Status	Target Date (Priority)	Target Assessment Impact Probability Rating		
Management Team (SMT) agreed that it was necessary to undertake a review of the current RAS and the operational policy and quality assurance process supporting it to deliver the required MTFS savings.				and legal view. Then to be circulated and commented with key partnership groups. <i>In Progress</i> (50% complete) Resource allocation system (RAS) testing The amended RAS is to be reviewed by Care Service Delivery Heads of Service. In addition, it will be tested by using 719 clients for whom we have full sets of data. In addition, the RAS performance will be tested by using every new client making use of the Service from 1st April 2012 to end of June 2012. <i>In Progress</i> (5% complete)		31/07/2012 (High)			
AS0061 - Staffing & Culture Failure to achieve sickness absence target of 7 days	Moderate 3	Likely 4	Medium High 12	Mandatory return to work training for all managers <i>Proposed</i> (2% complete)	Treat	29/03/2013 (Normal)	Moderate 3	Unlikely 2	Medium Low 6