

SCRUTINY COMMISSION FOR HEALTH ISSUES

TUESDAY 17 JULY 2012

7.00 PM

Bourges/Viersen room - Town Hall

AGENDA

Page No

1. Apologies

2. Declarations of Interest and Whipping Declarations

At this point Members must declare whether they have an interest, whether personal or prejudicial, in any of the items on the agenda. Members must also declare if they are subject to their party group whip in relation to any items under consideration.

3. Minutes of the meeting held on 21 June 2012

1 - 6

4. Call In of any Cabinet, Cabinet Member or Key Officer Decisions

The decision notice for each decision will bear the date on which it is published and will specify that the decision may then be implemented on the expiry of 3 working days after the publication of the decision (not including the date of publication), unless a request for call-in of the decision is received from any two Members of a Scrutiny Committee or Scrutiny Commissions. If a request for call-in of a decision is received, implementation of the decision remains suspended for consideration by the relevant Scrutiny Committee or Commission.

5. Quarterly Performance Report on Adult Social Care Services In Peterborough

7 - 24

6. Older Peoples Accommodation Strategy

25 - 52

7. Forward Plan of Key Decisions

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8. Work Programme

69 - 72

9. Date of Next Meeting

Thursday 20 September 2012



There is an induction hearing loop system available in all meeting rooms. Some of the systems are infra-red operated, if you wish to use this system then please contact Paulina Ford on 01733 452508 as soon as possible.

Emergency Evacuation Procedure – Outside Normal Office Hours

In the event of the fire alarm sounding all persons should vacate the building by way of the nearest escape route and proceed directly to the assembly point in front of the Cathedral. The duty Beadle will assume overall control during any evacuation, however in the unlikely event the Beadle is unavailable, this responsibility will be assumed by the Committee Chair.

Committee Members:

Councillors: B Rush (Chairman), D Lamb (Vice Chairman), J Stokes, McKean, K Sharp,
N Shabbir and A Sylvester

Substitutes: Councillors: D Harrington, M Jamil and Maqbool

Further information about this meeting can be obtained from Paulina Ford on telephone 01733 452508 or by email – paulina.ford@peterborough.gov.uk

**MINUTES OF A MEETING OF THE SCRUTINY COMMISSION FOR HEALTH ISSUES
HELD AT THE BOURGES / VIERSEN ROOMS, TOWN HALL
ON 21 JUNE 2012**

Present: Councillors B Rush (Chairman), D Lamb (Vice Chair), J Stokes, D McKean, K Sharp, M Jamil

Also present Barbara Cork, LINKs Representative
Katie Baxter, Youth Council Representative
Matthew Purcell, Youth Council Representative
Joan Tiplady, Senior Manager, PSHFT
Geeta Pankhania, Public Health Specialist, NHSP

Officers Present: Terry Rich, Director of Adult Social Care
Paulina Ford, Senior Governance Officer, Scrutiny

1. Apologies

Apologies for absence were received from Councillor Shabbir and Councillor Sylvester. Councillor Jamil attended as substitute for Councillor Sylvester. Apologies were also received from David Whiles, Chair of LINKs.

2. Declarations of Interest and Whipping Declarations

A declaration of interest was received from Cllr McKean who declared that he was a member of the Patient Participation Group at Thorney.

3. Minutes of meeting held on 26 March 2012

The minutes of the meeting held on 26 March 2012 were approved as an accurate record.

4. Call In of any Cabinet, Cabinet Member or Key Officer Decisions

There were no requests for call-in to consider.

5. Equality Delivery System (EDS)

The report was brought to the Commission at the request of officers to comply with the Department of Health requirement for the EDS ratings to be seen and approved by the Commission. The report provided the Commission with grading templates and progress and objectives for the Peterborough and Stamford Hospitals NHS Foundation Trust and the NHS Peterborough covering the nine protected characteristics. The Equality Delivery System was a framework designed to help NHS organisations to improve their performance for all equality groups and to meet their duties under the Equality Act 2010.

Observations and questions were raised and discussed including:

- Members queried the recommendation within the report which stated “The Commission is being asked to approve the rating templates of NHSP and PSHFT” and wanted to know if they were also being asked to comment. *The Senior Manager, PSHFT advised Members that it was a requirement from the Department of Health that the Commission approve the rating templates.*

- Members were concerned at the number of RED ratings within the NHS Peterborough and Cambridge Grading Template. *Members were advised that during the workshops held with staff and representatives from the nine protected characteristics the feedback given was that whilst there was some good work being done it was not evident that enough work was being done within the nine protected characteristic groups. These would therefore be areas of focus for improvement to ensure that those disadvantaged groups were well serviced.*
- What sort of work will be done to reduce health inequalities? *The Public Health Specialist informed Members that Public Health was moving to the City Council and was therefore undergoing a large transition process however the communities most affected were being prioritised and had been included in the improvement plan for this year. The Senior Manager, PSHFT advised that the Hospitals Trust for this year had primarily focused on people with physical disabilities and learning disabilities.*
- Members were concerned that the more deprived areas of Peterborough may suffer during the Public Health transition. *Members were informed that one of the key priorities of the Promoting Healthy Lifestyles Programme was that Health Trainers worked in the communities to support people in leading a healthy lifestyle through focusing on stopping smoking, low alcohol rates, nutrition and promoting physical activity. The work was ongoing and would be strengthened with the transition to the City Council. The second priority was Cancer inequalities and getting people screened earlier and not missing their appointments.*
- Members noted that in Appendix 1 the NHSP Grading Template section 4 - Inclusive Leadership at all levels was showing predominantly RED ratings but that section 3 – Empowered, engaged and well-supported staff was predominantly GREEN and AMBER. Why was the Leadership section showing as RED? *Members were advised that there were a significant number of policies already in place for section 3 which therefore raised the ratings to GREEN and AMBER. With regard to section 4 there had been a change of Leadership but by the end of June the ratings for this section would have moved to AMBER and GREEN.*
- Members wished to know why the Peterborough and Stamford Hospitals Trust were only concentrating on two priorities for the year and not all of the RED rated areas. *Members were advised that there were already well established groups working with disabled people and it was clear what was needed to be done. It had been decided that it was better to concentrate on a few areas and achieve those first rather than try and deal with all of the action plan in one go.*
- Members were concerned with the RED rating for workforce health and wellbeing. *Members were informed that there was a workforce health and wellbeing internal forum in place to look at this area. When it was being rated there was a problem evidencing this and it had therefore received a RED rating.*
- A member of the public Mary Cook addressed the Commission and referred to the Cancer Health inequalities and Cancer Needs Assessment ratings which were both RED. Was the Public Health Specialist engaged with the End of Life Strategy and if so how. *The Public Health Specialist responded that she was engaged with the End of Life Strategy and had undertaken an Equality Impact Assessment on the strategy.*
- Members were concerned that the ratings templates of the NHSP and PSHFT provided a poor picture of the health service and requested that more information be provided on all of the RED rated indicators to show what actions were being taken to improve the ratings.

RECOMMENDATION

The Commission recommended that

- I. The rating templates of the NHSP and PSHFT were approved and;
- II. That further detailed information is brought back to the Commission in September to evidence what action was being taken to improve the indicators that were rated as RED.

6. Adult Social Care – Post Transfer Update

The report provided the Commission with a post transfer update on Adult Social Care Services to the City Council which was transferred over from NHS Peterborough on 1 March 2012. The Director of Adult Social Care highlighted the following key issues;

- Transfer over to the City Council ICT systems had caused some teething problems but work was continuing to resolve them.
- There were backlogs in work at point of transfer. Risk assessment, prioritising and dealing with the backlogs had been a top priority.
- 750 cases had reviews overdue at the point of transfer. Priority had been given to safeguarding cases and additional social worker/care management capacity had been secured to focus on clearing the backlog over the next three months.
- At the point of transfer there had been 250 new referrals unallocated and awaiting assessment of need. This had been reduced to 61 by the end of May.
- Direct Payments. There had been an urgent need to review and revise the guidance for staff and service users on what direct payments could be used for. Clear guidance was now being given.
- Greater focus was now being given to how adult social care and the City Council would work with the emerging NHS organisational structures and in particular the new Clinical Commissioning Group.

Observations and questions were raised and discussed including:

- How many additional staff had been taken on to deal with the backlog of work? *Members were informed that an external organisation had been contracted to complete this work on a cost per review basis. There were service users in placements all over the country and the organisation that was undertaking the work had care professionals all over the country so were able to provide resources near to where the service user was located. Two managers would oversee staff to ensure the backlog was cleared. This was a better solution than providing a dedicated team of people who had to travel to various locations.*
- What progress was being made with the backlog? *It was estimated that the backlog would be cleared in three months.*
- Regarding the ICT teething problems. Are staff able to look at both the NHS and City Council ICT systems? *Members were advised that there were no gaps in terms of what the NHS staff had access to on both systems. The current issue was that while the NHS systems were being transferred over to the City Council system staff had to use both ICT systems.*
- Was there adequate support being given to ensure that the ICT systems were transferred by August. *A Project Manager from Serco was providing dedicated support along with other officers.*
- What was the number of open pipeline safeguarding cases that could be expected in any given month? *Members were advised that it was 54.*
- You state that close monitoring of new referrals and alerts was being maintained and that the number of cases where investigations were completed in 20 days had risen to 65%. Was the 20 day target normal? *In terms of safeguarding 20 calendar days was stated as good practice..*
- How will you deal with the impact on Peterborough of the New Clinical Commissioning Group? *The Director of Adult Social Care advised Members that he was in discussion and working closely with the two Clinical Leads of the two Local Commissioning Groups to explore how best to work together.*
- The representative from LINKs was concerned about the delivery of service through contract staff and felt strongly that it was important to provide consistency of care for service users. *The Director of Adult Social Care agreed and advised Members that the contract staff were being used to undertake the reviews of care plans not the delivery of the care plan. The annual and six monthly reviews had not been taking place and the*

contract staff had been brought in to clear the backlog of reviews. A review was currently being undertaken to evaluate how many permanent staff would be needed to deliver the service going forward.

- Was there enough money in the budget to employ the extra staff to clear the backlog? *The City Council provided money in the budget to facilitate the transfer back to PCC but the budget was being closely monitored.*
- When negotiations were taking place regarding the transfer of Adult Social Care were you made aware of the 750 overdue case reviews. *Members were informed that the information had not been made available initially. It had been a challenge but all staff were working hard to put things back on track.*
- Could you explain why patients under the care of the Local Authority are placed in areas outside of Peterborough? *The service users are not classed as patients they are residents of this local authority. If they choose to move elsewhere to be nearer relatives and are in need of social care they are still the responsibility of this local authority.*

ACTION AGREED

That the Scrutiny Commission for Health Issues note the report and request that;

- I. The Director of Adult Social Care brings a report to the Commission on Safeguarding.
- II. A further progress report is brought to the Commission on Adult Social Care with particular reference to the progress made on the migration of ICT systems from the NHS to Peterborough City Council and the progress made on the 750 outstanding case reviews.

7. Redesign of Mental Health Services – Action to Monitor Implementation of the Proposals

The report informed the Commission of a proposal to set up a joint working group consisting of members of the Cambridgeshire County Council Adults Wellbeing and Health Overview and Scrutiny Committee and the Scrutiny Commission for Health Issues, to monitor implementation of the redesign of mental health services, follow up issues of common concern, and report back to the respective Committees as appropriate. After a short discussion Members agreed to the following recommendation.

RECOMMENDATION

The Commission recommends that:

- A joint working group consisting of members of the Cambridgeshire County Council Adults Wellbeing and Health Overview and Scrutiny Committee and the Scrutiny Commission for Health Issues be set up to monitor the implementation of the redesign of mental health services and follow up issues of common concern. The working group to report back to the respective Committees as appropriate.
- The Commission agree to the nomination of up to 5 members to the working group and that the nominations will come from the original membership of the Cambridgeshire and Peterborough Joint Overview and Scrutiny Committee. Peterborough's Joint OSC members were:
 - Councillors B Rush; Lamb, Stokes, Harrington, Shabbir
 - Substitute members were: Councillors Todd, Sharp

ACTION AGREED

The Senior Governance Officer to write to the original Peterborough Members of the Cambridgeshire and Peterborough Joint Overview and Scrutiny Committee requesting nominations to the new working group.

8. Review of Work Undertaken in 2011-2012 and Work Programme for 2012-2013

The report provided the Commission with:

- a review of work undertaken during 2011/12 and recommendations made
- the terms of reference for the Commission and
- a draft work programme for consideration

The Senior Governance Officer tabled a list of possible items for scrutiny by the Commission which had been compiled after discussions with the Chair and Lead Officers prior to the meeting.

After consideration of the items within the report the Members of the Commission requested that in addition to the list of items tabled they receive an update on the Primary and Urgent Care Review. Members also requested a report on the challenges that Peterborough will face in the future with regard to age demographics of the City and mental health and dementia services.

ACTION AGREED

The Commission agreed that the Senior Governance Officer work with the Chair and Group Representatives to manage the work programme of the Commission and programme in requested items.

9. Forward Plan of key Decisions

The Commission received the latest version of the Council's Forward Plan, containing key decisions that the Leader of the Council anticipated the Cabinet or individual Cabinet Members would make during the course of the following four months. Members were invited to comment on the Plan and, where appropriate, identify any relevant areas for inclusion in the Committee's work programme.

ACTION AGREED

The Committee noted the Forward Plan and agreed that the following Key Decision should be brought to the Commission for Scrutiny at the meeting in July:

- Consultation on the Review of the Older Peoples Accommodation Strategy and options for the future of Care Homes in Peterborough -KEY/02JUL/12

10. Date of Next Meeting

Tuesday 17 July 2012

CHAIRMAN
7.00 - 8.28 pm

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| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 5 |
| 17 JULY 2012 | Public Report |

Report of the Executive Director of Adult Social Care

Contact Officer(s) – Tina Hornsby – Assistant Director Quality Information and Performance
 Contact Details - tina.hornsby@peterborough.gov.uk 01733 758558

Quarterly Performance Report on Adult Social Care

1. PURPOSE

- 1.1 The attached report provides an update on the delivery of Adult Social Care services in Peterborough against the four outcomes domains contained within the national Adult Social Care outcomes framework.

2. RECOMMENDATIONS

- 2.1 The Scrutiny Commission are asked to review and comment upon the performance information within the report.

3. LINKS TO THE SUSTAINABLE COMMUNITY STRATEGY

- 3.1 The Adult Social Care outcomes have strong links to the health and wellbeing aspects of the community strategy.

The report details performance against all available national indicators from the national outcomes framework.

4. BACKGROUND

- 4.1 The attached report has been constructed to provide summarised information on the following:

- An overview of progress on priority areas within the four national outcome domains (including Safeguarding);
- An updated position with regard to progress against national and local performance indicators;
- An update on the status of key projects which are underway to achieve these priorities
- Additional activity data where this is appropriate;
- Examples of the impact of our work on service users and carers in Peterborough

This report covers the fourth quarter of 2011-12, and gives the position at the end of the annual performance cycle.

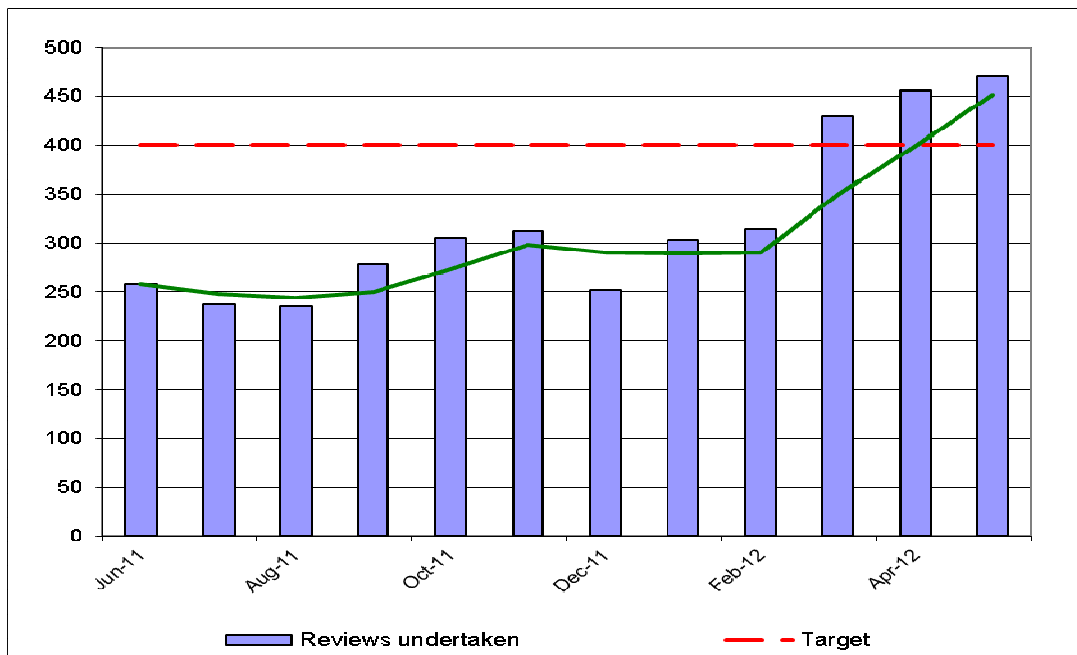
5. KEY ISSUES

5.1 The full year view of performance in 2011/12 is included in the attached report. This includes some areas where performance has been good over the year including:

- The percentage of adults with learning disabilities in paid employment remains high due to the work of PCC Supported Employment service. We have included some case studies on the work of this service.
- The percentage of service users accessing self directed support has increased on last year and is still above the national target. Although not reaching our locally set target we believe this is due to remodelling of our processes to prevent the need for long term services, rather than a failure to offer self directed support to those accessing long term services.
- Continued low numbers of admissions of older people into permanent residential care.
- Continued high level of people leaving intermediate care and living independently in their own home 3 months later.

5.2 However there are some areas for concern:

- When the care management teams transferred in March 2012 backlogs were discovered in both scheduled reviews and safeguarding investigations. Some background to this was provided to Scrutiny Commission in their meeting in June. The chart below shows how the numbers of reviews carried out have increased since March 2012



- There were in excess of 450 open safeguarding cases when the service transferred. All have now been assessed and completed with most having been closed. The closure process has included a data quality and audit check to ensure all necessary information is included to ensure improved reporting of outcomes. A small number of referrals requiring further ongoing work now have protection plans in place. The average number of new referrals in a month is 77 and we should aim to have around that number open at any one time. Currently we have 92 open active referrals.
- We have received the results of our Adult Social Care survey and have a number of areas in which we know we could do better. These include overall levels of satisfaction from our service users, access to information and advice, and the extent to which our

social care services help people to feel safe.

6. IMPLICATIONS

6.1 The report relates to city wide delivery of adult social care.

7. CONSULTATION

7.1 None

8. NEXT STEPS

8.1 A Local Account reflecting on the performance in 2011/12 and the priorities for 2012/13 will be presented to Scrutiny Commission in the Autumn.

9. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

9.1 Transparency in outcomes: a framework for quality in adult social care
The 2011/12 Adult Social Care Outcomes Framework

10. APPENDICES

10.1 Quarter 4 performance report

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Adult Social Care – Quarter 4 2011-12 Performance Report

Tina Hornsby – Assistant Director Quality Information and Performance – Peterborough City Council Adult Social Care

Introduction

The following report seeks to evidence delivery against the four outcome domains within the national Adult Social Care Outcomes Framework:

- Domain 1 - Enhancing quality of life for people with care and support needs
- Domain 2 - Delaying and reducing the need for care and support
- Domain 3 - Ensuring that people have a positive experience of care and support
- Domain 4 - Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm.

This report has been constructed to provide summarised information on the following:

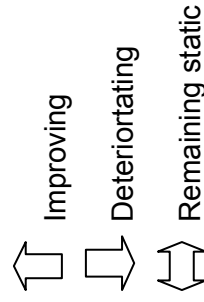
- An overview of progress on priority areas within these four outcomes
- An updated position with regard to progress against national and local performance indicators
- An update on the status of key projects which are underway to achieve these priorities
- Additional activity data where this is appropriate
- Examples of the impact of our work on service users and carers in Peterborough

Key

RAG (Red/Amber/Green) = Performance and risk status

- RED Behind target and plans are not likely to bring back on target
- AMBER Behind target but plans in place and likely to resolve issues or behind target but good comparative performance/progress
- GREEN On target

Direction of Travel



Outcome 1: Promoting personalisation and enhancing quality of life for people with care and support needs

Summary of Key Priorities







Personal budgets and self directed support:

- We will make sure systems are in place to allow people who require social care support to easily find and choose quality support, and control when and where services are provided, and by whom;
- For those people eligible for council funding, the amount available to them is known prior to the person starting to make their support plan;
- We want people to have the ability to spend all of their money in a way that they choose, including being able to mix directly purchased and council provided services; and
- We will support people planning their own support, either directly or through the use of commissioned services in the third sector or via peer support and support from people who are experts by experience.

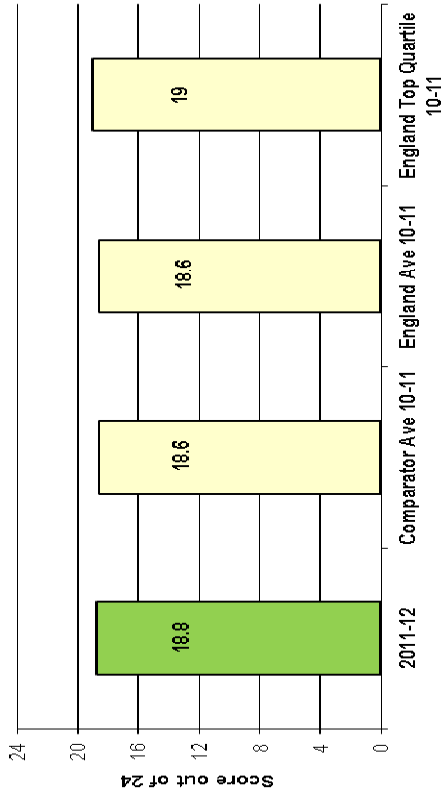
Information and Advice:

- We will create a universal information and advice system for adult social care. Everyone needs universal access to information and advice to ensure they can live their lives and choose the best support regardless of how that is funded. All people should be able to access universal services such as transport, leisure and education facilities, housing, health services and opportunities for meaningful occupation and get on with living their lives.
- Good information (which is current, relevant and accurate) is essential for all adults and their relatives who need, or may need support in order to live their lives. Good information should help people make wise choices, enable them to take control and help prevent people from losing their abilities, skills and independence.
- Our challenge is to ensure that everyone with a social care need (no matter how large or small) can find the information to meet their need, in a form and through a channel appropriate to them.

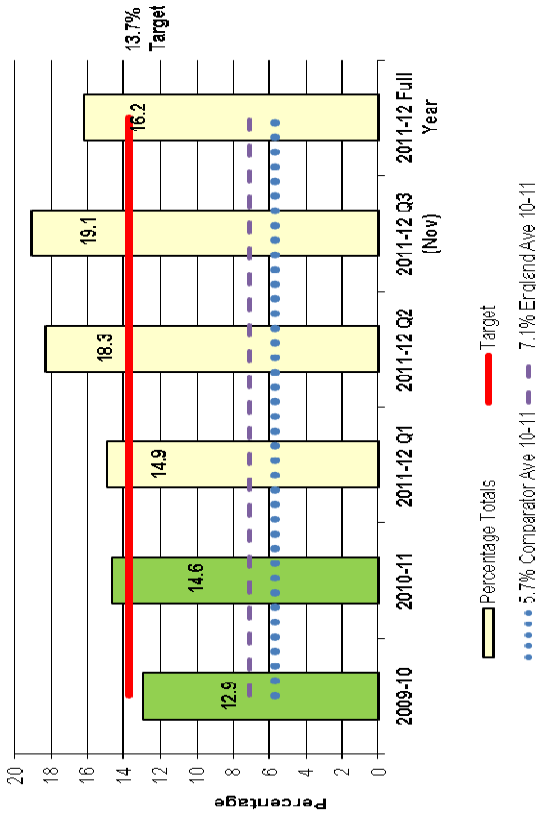
NATIONAL PERFORMANCE INDICATORS: DASHBOARD

| Indicator | Comment | Direction of travel | Q3 RAG |
|---|---|---|--------|
| Self reported patient experience | Update from the survey completed in Feb – March 2012. The combined quality score is 18.8 which is unchanged since the previous year. Initial bench-marking suggests this is slightly above national average of 18.7 for 2011/12 |  | Green |
| Adults with learning disabilities in paid employment | 16.2% of all adults with LD known to the department in 2011/12 were in paid employment. A further improvement on the previous year. |  | Green |
| Adults and older people receiving self directed support (SDS) | Although we have improved the percentage from last year (39.4-41.3%) we have struggled to meet the target. This is in large part due to fall out of short term service users who never become eligible for a personal budget. |  | Amber |
| Adults in contact with mental health services in paid employment | Local performance information indicates that the target was met – national information is awaited. |  | Green |
| Adults with learning disabilities in settled accommodation | The percentages in settled accommodation remain similar to last year and ,although comparatively good nationally, did not quite achieve the target of 75% |  | Amber |
| Adults in contact with mental health services in settled accommodation | Local performance information indicates that the target was met – national information is awaited. |  | Green |

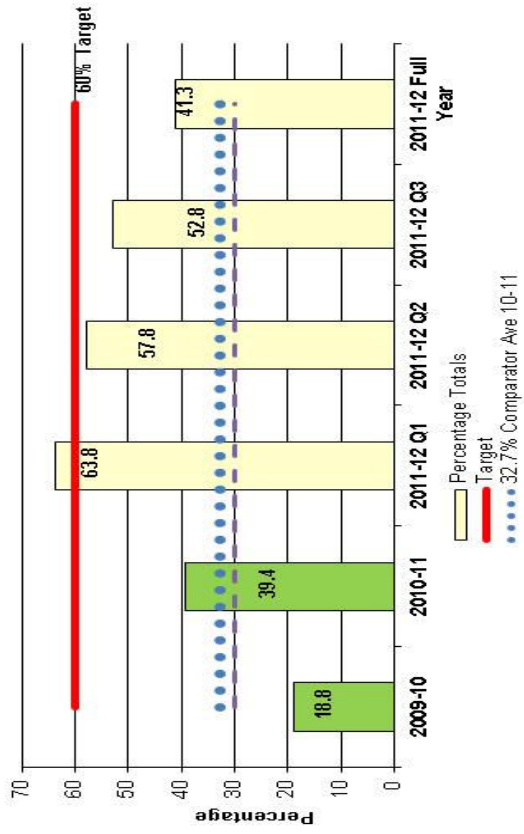
Self reported experience of social care users (1A)



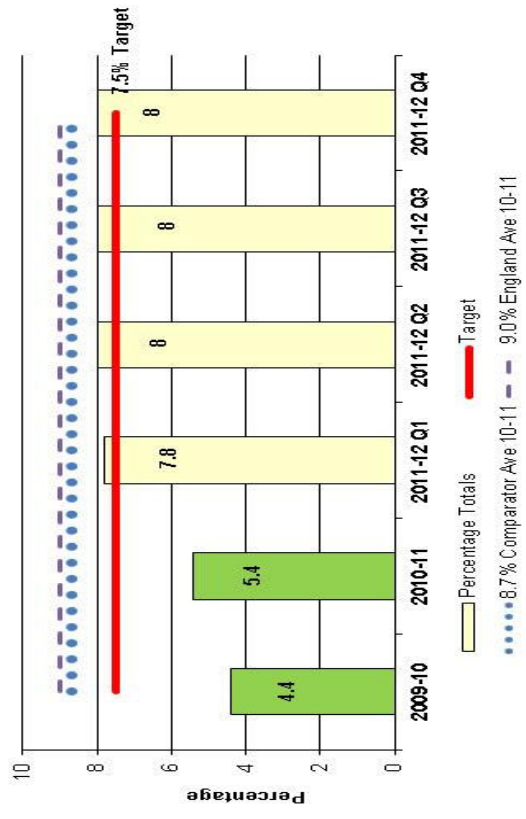
Adults with learning disabilities in employment (1E)

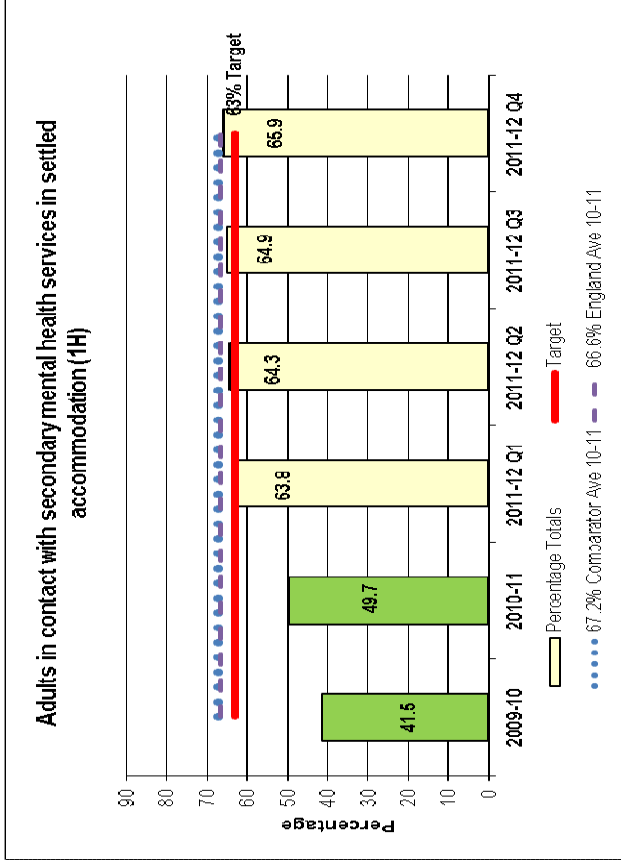
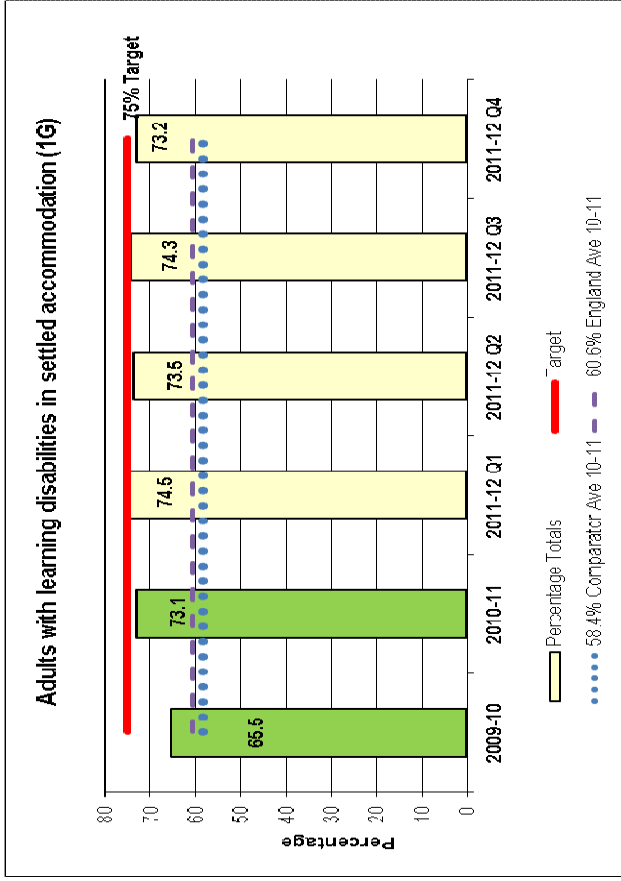


Social care clients receiving Self Directed Support (1C)



Adults in contact with secondary mental health services in employment (1F)





Promoting personalisation and enhancing quality of life for people with care and support needs

| Project | Description | Progress update | Status |
|--|---|--|--------------|
| <i>Living My Life - Support planning</i> | Putting in place support planning and personal budgets for 60% of all Adult Social Care customers | During 2012/13 41.3% of anybody receiving services through Adult Social Care received them via a personalised budget. A system is now in place to audit all reviews which take place within the department which do not result in a personal budget, in order ensure personal budgets are always being offered when appropriate. The inability to reach 60% is thought to be due to the introduction of changes to deliver such as re-ablement, where there are a high percentage of people leaving without needing a permanent service. | Amber |
| <i>Living My Life - Risk enablement</i> | Developing a risk enablement policy and guidance that supports customers making decisions around their personal budgets – then rolling out the policy and creating a culture that extends choice and control. | Complete: the policy was reviewed in March 2012. | Green |

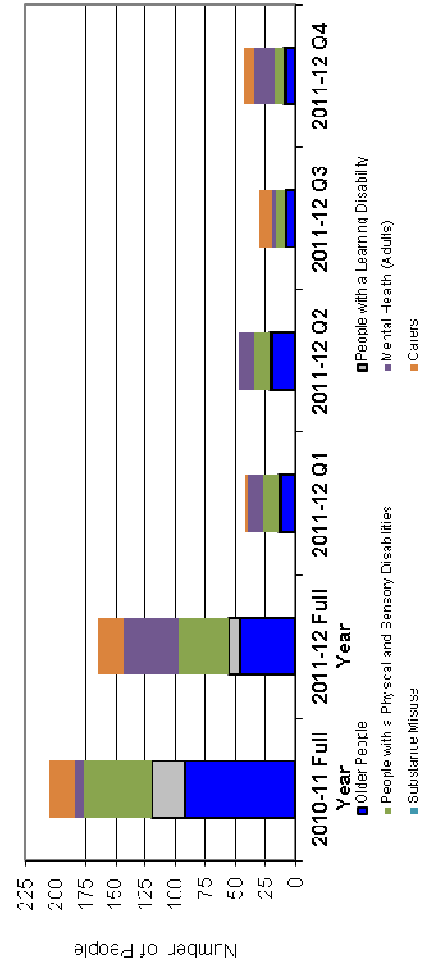
Promoting personalisation and enhancing quality of life for people with care and support needs

Related Projects

| Project | Description | Progress update | Status |
|---|--|--|--------------|
| <i>Living My Life - Advice and information</i> | Creating a universal advice and information offer – which connects through to the front door for Adult Social Care via a partnership with statutory, voluntary and private sector providers. | The implementation of the online directory was delayed due to the transfer of the department back into the council and the need to take stock of the web tools and services available to the Council. Creation of an universal directory and refreshed web pages for the transferred Adult Social Care service is a key priority for delivery this year. We are working to ensure we have a user friendly online directory and web pages that will be able to be developed at a later stage to provide direct links through to booking systems. We expect to deliver this by the third quarter of 2012/13. | Amber |
| <i>Adult Placement Scheme for people with learning disabilities</i> | Expanding the number of people who can benefit from this scheme which has good outcomes and is cost-effective. Investment in marketing and capacity to promote | We now have 12 sets of carers supporting 25 service users in all. The Scheme offers a range of support i.e. some carers offer Respite, some offer Day Care, some offer full time, permanent (live-in) support, it is all dependent on need of individuals and the skills/knowledge of the carers. We work together with service users to match individual need with skills/ability of carers. | Green |

Additional Key Activity Data

Number of People receiving Direct Payments who did not have one previously



The number of new recipients of direct payments fell to 164 in 2011/12, although there was growth in the use for mental health support packages. The overall numbers receiving direct payments remained stable however.

Peterborough City Council Supported Employment (PCCSE) A Success Story

PCCSE, has been supporting people with disabilities and long term health conditions into sustainable employment over the past 40 years.

During the past 6 months it has had unprecedented success levels securing jobs for service users despite the tough economic and jobs market and is currently the top performing supported employment provider in the East of England and amongst the very top performers nationally.

PCCSE support a range of conditions including learning, autism, physical, sensory and mental health conditions, providing a modular, customer-centred service supporting individuals to overcome their short and long term barriers to employment. Its customers have a range of abilities, experience and qualifications, from graduates to entry level, who can provide invaluable talent, skills and motivation to any vocation. PCCSE recent successes have included securing jobs in manufacturing, engineering, warehouse and distribution, office admin, care work, catering and security.

Recent success stories:

“Mr X first came to PCCSE in September of 2011 and had been unemployed for a period of 4 years due to ill health through the physical requirements of his then job.

When he arrived he was lacking in confidence and although his motivation levels were there, there was always doubt that his physical fitness and health problems would impact on his ability to secure employment. Mr X attended pain management classes to help him seek acceptance of his condition and its effects on him.

PCCSE worked closely together with him and started initially by updating his CV, talking about previous positions held and what skills and abilities he had taken to and from each of these roles. They also spoke of previous training he had received and although initially he was looking to go into a different occupation he decided that after a work experience placement this was not what he wanted. His wish was to go back to the role that he enjoyed and had spent most of his life doing which was care work.

Support was given to work through concerns from Mr x’s family. Time was spent job searching and applying for positions. Initially applications were filled out at PCCSE and as time went on Mr X became confident enough to also apply for positions independently. He has now secured a position with a community based care provider. PCCSE will continue to provide ongoing support to Mr X until both he and his employer are happy that support is no longer needed.”

“Mr Y has a learning disability and upon first attending his confidence levels were low as he had been out of paid employment for several years, only managing to secure voluntary positions. PCCSE commenced the program by putting together a CV which listed his skills and attributes. They established that his numeracy and literacy skills needed to be improved so after having discussions he felt that he would like to improve these and enrolled him onto the “Skills for Life” course at City College, Peterborough.

PCCSE then set up an email account so that we could apply for positions online and registered with several agencies and applying for numerous positions and whilst going through this process Mr Y became more and more confident.

PCCSE then had the opportunity for him to attend an interview at Lovefilm. Prior to attending this they had several sessions concentrating on interview skills and techniques in preparation for any questions that may have arose. On the day of his interview a member of staff collected him from his home address and took him to the venue. After his interview he was offered a position on a 13 week contract and started the following week. As the client at the time did not have any transport this was arranged for him with a local taxi service. PCCSE later provided support in helping him to travel to work independently on public transport.

Mr Y received support with signing off claiming his jobseekers allowance and was also helped with housing forms and the start of employment. He has now held this position for a period of 6 months and is progressing and performing very well.”

Outcome 2: Preventing deterioration, delaying dependency and supporting recovery.

Summary of Key Priorities

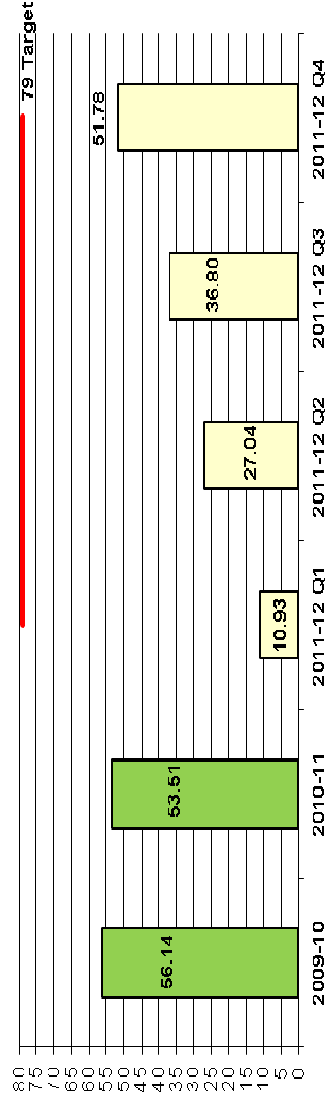
The Peterborough *Living My Life* programme says about prevention and re-ablement:

- We want people to have access to support that will help them to stay independent for as long as possible.
- When people need some help to regain independence to live in their own home after an accident or a period in hospital, we want to be able bring all partners together to provide some intensive time limited support to help people get back to living their life as quickly and independently as possible.
- We will make sure that the council and the NHS are working jointly to make supports like telecare and telehealth (sometimes also called assistive technology) available as an option for those who need it.
- Information will be available about the assistive technology so that people can make informed choices.

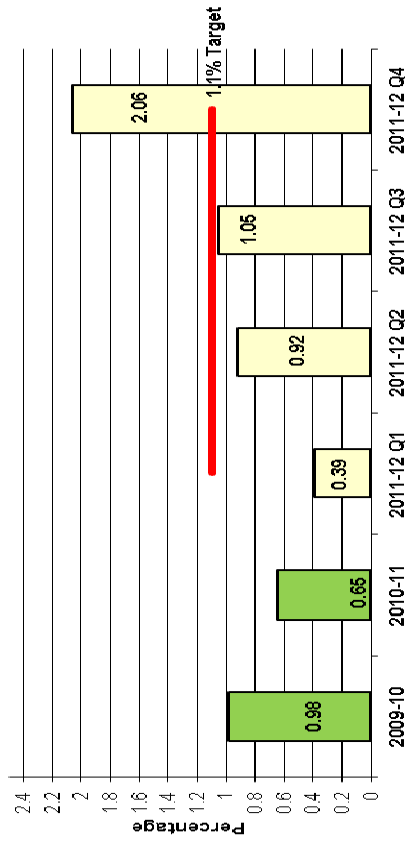
NATIONAL PERFORMANCE INDICATORS: DASHBOARD

| Indicator | Comment | Direction of travel | Q4 RAG |
|---|--|---------------------|--------|
| Permanent admissions to residential care homes per 1,000 population age 65+ | The number of permanent admission of older people into residential care reduced again this year and is well below the national and comparator average. | ↶ | Green |
| Permanent admissions to residential care homes per 1,000 population age 18-65 | The number of younger adults admitted into permanent residential care, although small, has increased in 2011/12. | ↷ | Amber |
| Delayed transfers of care from hospitals per 100k population | The number of delayed transfers, although slightly increased, remain comparatively low and within the ceiling target. | ↷ | Green |
| Proportion of people achieving independence 3 months after entering intermediate care | A higher percentage of older people discharged from hospital into intermediate care were living independently at home 3 months later than the previous year, exceeding targets. | ↶ | Green |
| Proportion of carers receiving an assessment or review in the year | The proportion of carers receiving a service following assessment has reduced in 2011/12 although is still comparatively high. Work need to be undertaken to analyse the quality of assessments during 2012/13 | ↷ | Amber |

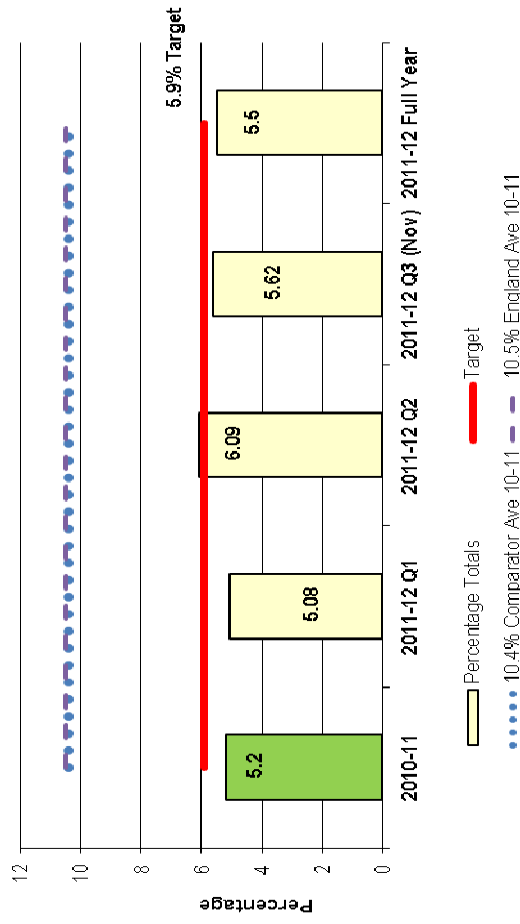
Older people aged 65 or over admitted on a permanent basis in the year to residential or nursing care per 10,000



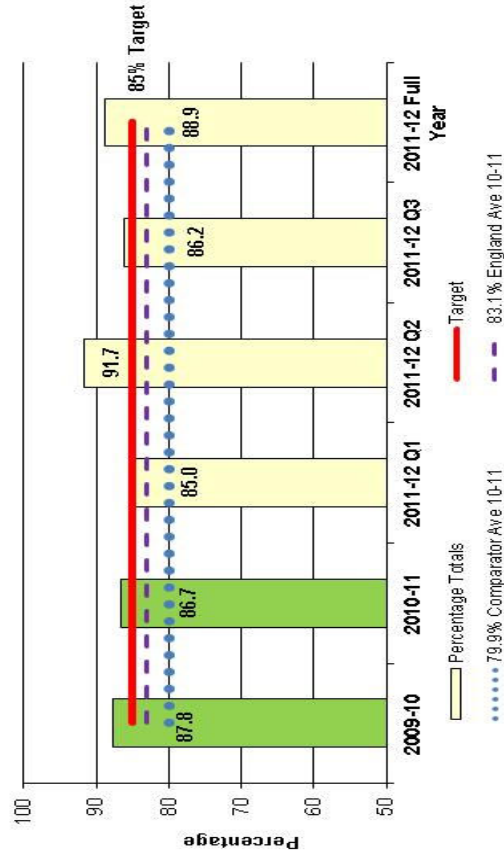
Adults aged 18-64 admitted on a permanent basis in the year to residential or nursing care per 10,000



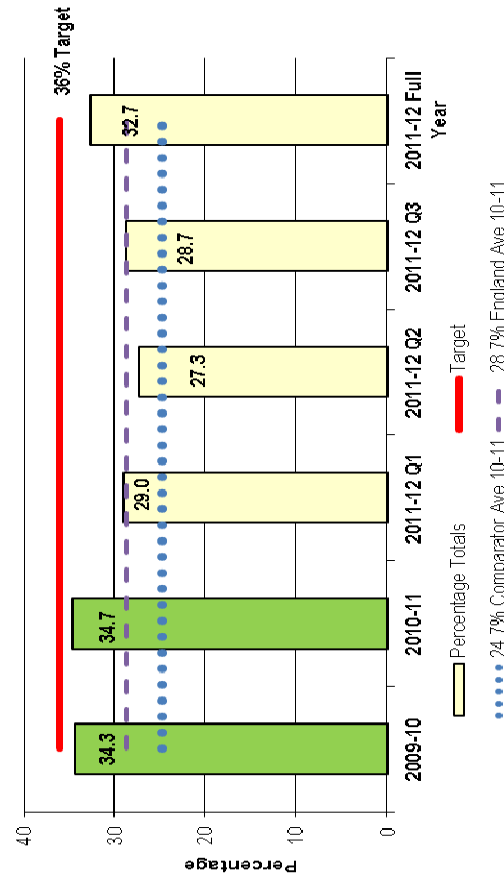
Delayed Transfers of Care (2C)



Achieving independence for older people through rehab/intermediate care (2B)



Carers receiving needs assessment or review and a specific carer's service, or advice and information



Preventing deterioration, delaying dependency and supporting recovery Related Projects

| Project | Description | Progress update | Status |
|---|---|---|--------|
| <i>Disability Sports Development Project</i> | A refocusing of the learning disability day services to enable people to have access to sports and recreation. | This role has been mainstreamed – completed | Green |
| <i>Living My Life – Reablement</i> | To provide customers with effective re-ablement and home based support services in order that they are assisted to live as independently as possible in their own home. | Initial phases implemented; reablement service available at discharge from hospital and for new referrals to community social work teams. Independent sector providers are being used to increase capacity. Staff are receiving training in the new default pathway for reablement. A dashboard is under development to track outcomes of reablement. | Amber |
| <i>Learning Disability Intensive Community Support Team</i> | Provision of an intensive community support service to support people returning to Peterborough from out of area residential placements. | The Intensive Support Team has identified around 30 people who can return to Peterborough over three years. Ten people have already returned to Peterborough to new support and care packages in the City with another ten planned to return before the end of March 2013. Preparatory work is underway for the next group of people who are likely to return in 2013-14. | Green |

Additional Key Activity Data

Intermediate Care Services

| ACTIVITY AREA | 2010/11 | Q1 – 2011/12 | Q2 – 2011/12 | Q3 – 2011/12 | Q4 – 2011/12 | Total YTD |
|---|---------|--------------|--------------|--------------|--------------|-----------|
| Intermediate Care Services to prevent hospital admissions | | | | | | |
| Number of people receiving non-residential intermediate care to prevent hospital admission | 196 | 81 | 43 | 63 | 58 | 245 |
| Number of people receiving residential intermediate care to prevent hospital admission | 242 | 49 | 43 | 89 | 75 | 256 |
| Intermediate Care Services to facilitate timely hospital discharge and / or effective rehabilitation | | | | | | |
| Number of people receiving non-residential intermediate care to facilitate timely hospital discharge and/or effective rehabilitation | 741 | 58 | 36 | 60 | 71 | 225 |
| Number of people receiving residential intermediate care to facilitate timely hospital discharge and/or effective rehabilitation | 282 | 102 | 94 | 56 | 93 | 345 |

Intermediate care services have maintained their level of service, the drop in numbers receiving non residential intermediate care is thought to be due to the removal of hospital at home and palliative care services from the count.

THE SUPPORTING CARERS AND PEOPLE WITH A LEARNING DISABILITY PUBLIC HEALTH CAMPAIGN UNDERTAKEN WITH COMMUNITY PHARMACISTS

From 1st to 29th February 2012 a 'Supporting Carers and People with a Learning Disability' campaign was promoted across 42 pharmacies in Peterborough. This campaign endeavored to highlight key messages such as :

- Identifying Carers and offering support;
- Advising People with a Learning Disability of their entitlement to a Health Check;
- Information on services for Carers including health and fitness programmes;
- Information on services for People with a Learning Disability including a Community Safety Scheme and Passports for Secondary Care.

This campaign enabled Pharmacies to engage with Carers and People with a Learning Disability. They became an advisory resource for two vulnerable and socially invisible groups of people offering a beacon of best practice and signposting to services. The 42 pharmacies were requested to complete an evaluation form at the end of the campaign and to forward their recommendations/comments regarding the success of the promotion. The following comments were received as to how useful the campaign information was :

| Leaflets? | Campaign poster? | Case studies? | Medicine Reminder Chart? | Safe Place Scheme? |
|---|---|---|--|--|
| 35% responded very useful 61% responded useful 0% not useful 1% no comment | 26% responded very useful 65% responded useful 0% not useful 3% no comment | 23% responded very useful 71% responded useful 0% not useful 6% no comment | 29% responded very useful 55% responded useful 10% not useful 6% no comment | 19% responded very useful 68% responded useful 6% not useful 6% no comment 100% responded that they were satisfied with the Quality of the information provided, and 94% with the quantity of information. |

Some comments included:

- *More leaflets were required".*
- *Very good medicine chart, children liked them and the Safe Place Scheme. A lot of people will make contact with you. Very good idea.*
- *Found carers grateful of understanding of carers issues by pharmacy staff.*
- *All the information provided was of a good quality. Just a pity that there is little opportunity to speak to people, or people are unwilling to seek help from the pharmacy*
- *All the information in the campaign pack was more than sufficient, a well working campaign*
- *"More media coverage needed"*
- *"1/2 day awareness training at Peterborough Town Hall was brilliant".*



Outcome 3: Ensuring a positive experience of care and support

Summary of Key Priorities

The Government's vision for adult social care includes a focus on ensuring a positive experience for people who use services and their carers. The Government has stated that:

- The quality of care and individuals' outcomes will be directly influenced by their experience of the care and support they receive; and
- How easy it is to find and contact services, and how people are treated when they get them will have a major impact on perceptions and expectations of social care.

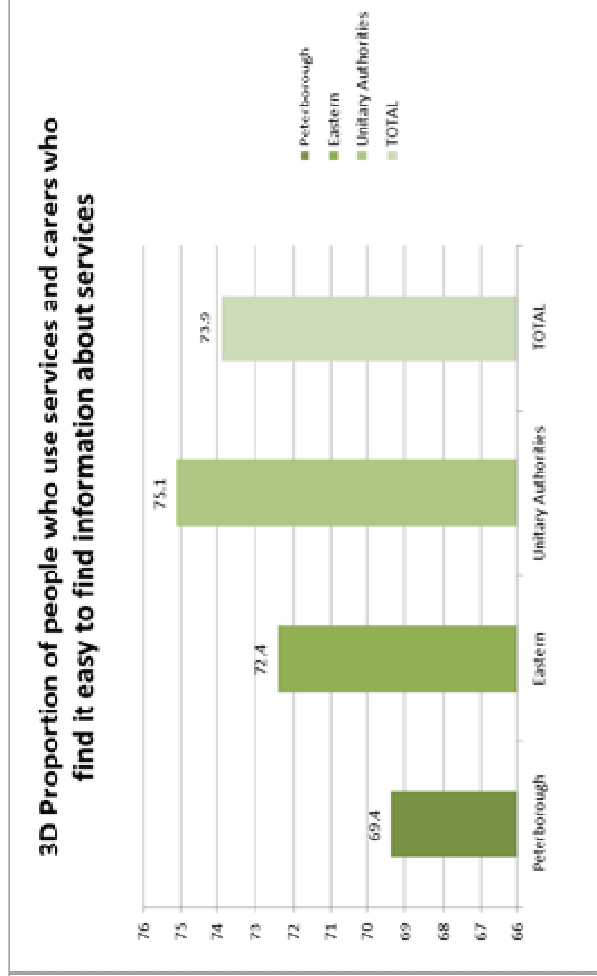
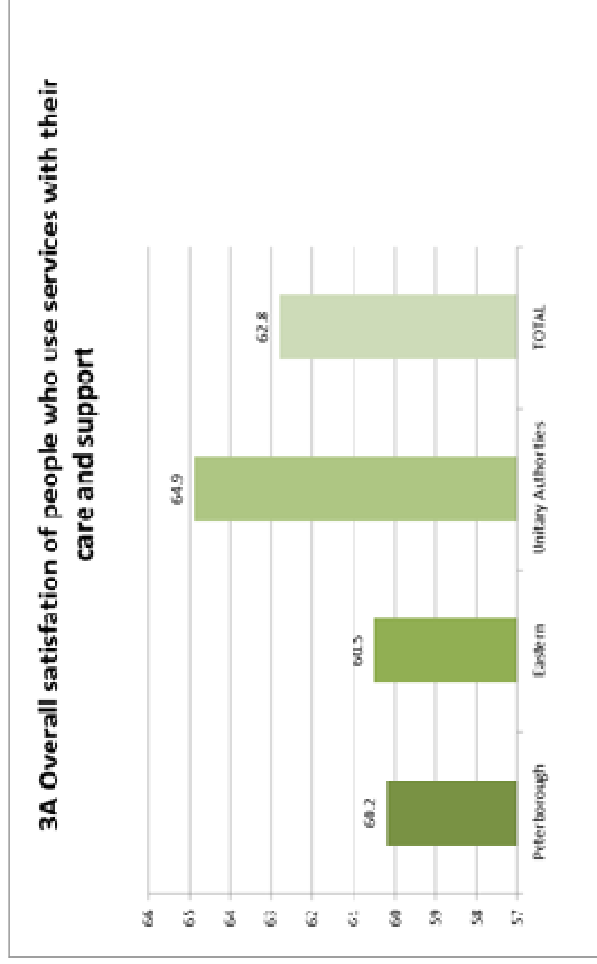
All our efforts are intended to secure a positive experience of care and support for service users and carers.

| NATIONAL PERFORMANCE INDICATORS: | | | |
|---|---|---|-----------|
| Indicator | Comment | Direction of Travel | Q4 |
| Overall satisfaction with local adult social care services | 60.2% of those responding to the statutory survey report being either extremely or very satisfied with the service they received. This is similar to the previous year (60.8) However this is below the national and regional average and warrants further analysis and action. |  | Amber |
| The proportion of people using social care and carers who express difficulty in finding information and advice about local services | 69.4% of those responding to the statutory survey stated that they found it very easy or fairly easy to find information about the support available to them. An improvement from 53.1% in the previous year, but still below the national and regional average. Delivery of an online directory and revised web pages should help to address this. |  | Amber |
| The proportion of carers who have reported that they have been included or consulted in discussions about the person they care for | National Carers survey will be run in Autumn 2012. | No target set | No update |

Service Users Survey 2012/13

The statutory service user survey was completed during February and March. We surveyed 1,000 of the service users out of the total of 3,505 who received services during the snapshot survey week, and received back completed responses from 366.

The headline results from the survey are included in the PI tables and charts within this report.



| Ensuring a positive experience of care and support Related Projects | | |
|---|--|---|
| Project (Improvement Plan Workstreams) | Description | Progress update |
| <i>Joint Planning & Capability - formalise quality assurance and performance management further</i> | Regular consideration of comparative analysis of activity data (including the safeguarding data already collected for Care Quality Commission) | A new performance management and activity monitoring framework has been developed. This has revealed a number of backlogs in the core care management processes. A new quality assurance role is being recruited to develop audits and quality monitoring mechanisms. Enhanced workflow monitoring and outcome tracking will be built into the new adult social care record system which will be implemented in December 2012. |
| <i>Implementation of electronic call monitoring</i> | The implementation of a Homecare Electronic Call Monitoring (ECM) System, which will allow remote tracking and monitoring of care delivered by paid carers in people's own homes | ECM project initiated with a project scope of working with independent sector providers to ensure full use of ECM by domiciliary care providers by the revised date of January 2013. |
| | | Amber |
| | | Amber |

Outcome 4: Protecting from avoidable harm and caring in a safe environment



Summary of Key Priorities

The Government's vision for protection is that:

- There are sensible safeguards against the risk of abuse or neglect;
- Risk is no longer an excuse to limit people's freedom.

The Peterborough *Living My Life* programme says about protection:

- We will make sure that people in the local community know what to do if they are concerned about adult abuse or neglect.
- By increasing personal control of support arrangements, we will reduce risks to people's safety and enable people to manage risks better.
- For those people who need or have purchased care in a care home we will make sure the quality of protection and personal care in regulated homes in our area is high. We will work with all partners to improve care practices and routines.

| NATIONAL PERFORMANCE INDICATORS: | | | |
|--|---|---|-------|
| Indicator | Comment | Direction of Travel | Q2 |
| The proportion of people using social care services who feel secure | 65.9% of respondents to the statutory survey reported feeling as safe as they wanted. This is a deterioration on 66% in the previous year but still anticipated to be above the national average based upon initial results from the Department of Health. |  | Amber |
| The proportion of people using services who said those services make them feel safe and secure | 68.6% of respondents to the statutory survey reported that the social care services they received made them feel safe and secure. This is a marked improvement on 55% in the previous year but still anticipated to be below the national average based upon initial results from the Department of Health. |  | Amber |

Safe Place scheme

This community safety scheme offers individuals with a Learning Disability a Safe Place to go to (identified by sticker in window) if in crisis or confused/frightened. Their Safe Place ID card identifies their 'important persons' telephone number and businesses are requested to phone this 'important person', advising them that their loved one/friend is on their premises and that they will provide them with a 'safe place' until they can be collected. Participating businesses are asked to:

- Place the 'Safe Place' sticker (shown above) in a clearly visible location i.e. shop window
- Assist the service user to telephone their 'in case of emergency' number or the Police if necessary.
- Feedback information to us if something is working very well or something needs to change.

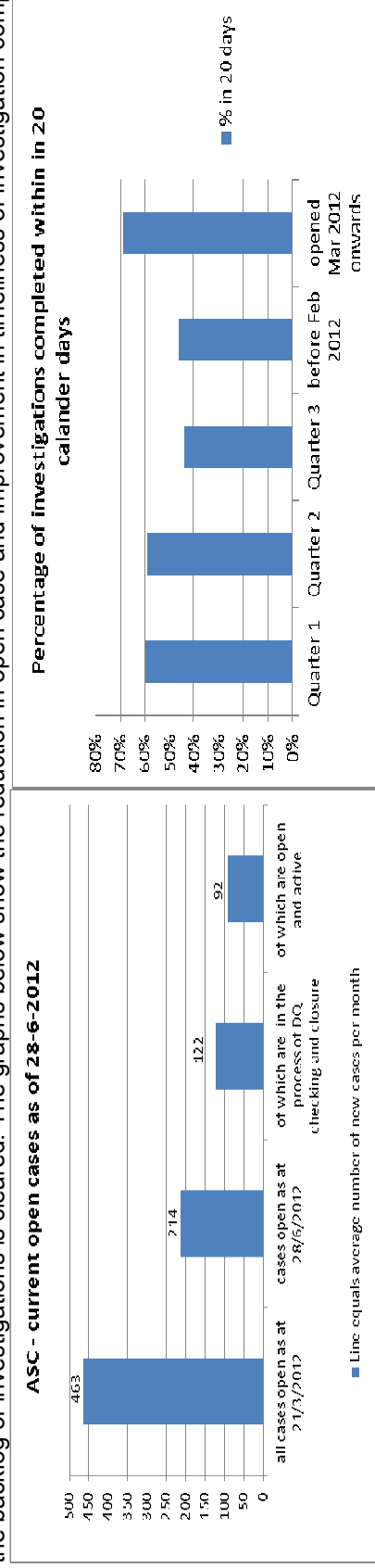
All participating service users will have a 'I need help' card, so that participating businesses will be able to identify them easily and also so you know who to call.

To ensure appropriate use of the service, participants will also undergo training so they know when and how they should use the service. In addition to this we are offering a 30-45minute training session for your staff on how to identify and assist service users in the best way possible.

| Protecting from avoidable harm and caring in a safe environment Related Projects | | | |
|--|--|---|--------------|
| Project (Improvement Plan Workstreams) | Description | Progress update | Status |
| <i>Joint Planning & Capability - new specialist safeguarding team</i> | Create and recruit to team. | Interim strategic lead, data and performance analyst, and administrator are in post. Permanent Lead role is out to advert following a lack of applicants in a previous recruitment round. Social work consultant roles are being developed within the operational teams. | Amber |
| <i>Prevention - strengthen the training for safeguarding</i> | Commission training to further strengthen the receiving, assessing, investigating and completing work about safeguarding concerns | E-learning package is in place and in use. Assessment of learning process in place and positive feedback from staff and managers. National competencies adopted and incorporated into basic level training and enhanced competencies are now being incorporated into the enhanced training. 2011/12 training plan agreed by Safeguarding Adults Board | Green |
| <i>Response to Safeguarding Concerns - further improve how safeguarding concerns are received, assessed, investigated – and the work completed</i> | Review and refine the work stream that starts with an alert about a safeguarding concern and ends with the completion of the required work | Improvement began early 2009, and new multi-agency policy in place. Multi-agency procedures have been developed but still required further work to embed into practice. Now working with Cambridgeshire to look at joint procedures and protocols across the county. A workshop was held to inform the annual report which is due to come to scrutiny commission in the Autumn. This identified the priorities for the 2011-12 business plan. | Amber |

Safeguarding process indicators

Following transfer of adult social care into the Council in March significant backlogs in the investigation process were discovered. Close monitoring of new referrals and alerts is being maintained and we are now confident that more than 65% of investigations are being completed within 20 days. This should improve now that the backlog of investigations is cleared. The graphs below show the reduction in open case and improvement in timeliness of investigation completions.



| | |
|--|--------------------------|
| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 6 |
| 17 JULY 2012 | Public Report |

Report of the Executive Director of Adult Social Services

Contact Officer(s) – Tim Bishop, Assistant Director Strategic Commissioning - Adult Social Services

Contact Details – 01733 758444

PETERBOROUGH OLDER PEOPLE’S ACCOMMODATION STRATEGY

1. PURPOSE

- 1.1 The purpose of this report is to ask the Scrutiny Commission to consider, challenge and comment on the Cabinet report and Older People’s Accommodation strategy (attached as Appendix 1) which will be presented to Cabinet on Tuesday 10 July.

2. RECOMMENDATIONS

- 2.1 That the Scrutiny Commission notes and comments on the Cabinet report and Older Peoples Accommodation Strategy.

3. BACKGROUND

- 3.1 Following a review of the Strategy for Older People’s Accommodation and Housing Related Support Services for Peterborough (2007) a report will be submitted to Cabinet on 10 July 2012 with an updated Older People’s Accommodation Strategy.

- 3.2 The original strategy was agreed by Cabinet in June 2007 and a further report recommending next steps was approved by the Cabinet in February 2010. That report outlined the closure plans for three care homes, the development of extra care housing identified that services at Greenwood House and Welland House would need to be provided elsewhere in due course.

4. KEY ISSUES

- 4.1 The key issues are outlined in the Cabinet report.

5. IMPLICATIONS

- 5.1 Implications are outlined in the Cabinet report.

6. CONSULTATION

- 6.1 As outlined in the Cabinet report.

7. NEXT STEPS

- 7.1 That the Scrutiny Commission notes and comments on the Cabinet report and Older Peoples Accommodation Strategy.

8. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

- 8.1 Older People’s Accommodation and Housing Related Support Strategy 2007

9. APPENDICES

- 9.1 Report to Cabinet and Older People’s Accommodation Strategy 2012

| | |
|--------------|-------------------|
| CABINET | AGENDA ITEM No. 5 |
| 10 JULY 2012 | PUBLIC REPORT |

| | | |
|--------------------------------|---|-----------------------------------|
| Cabinet Member(s) responsible: | Councillor Fitzgerald, Cabinet Member for Adult Social Care | |
| Contact Officer(s): | Terry Rich, Executive Director Adult Social Care Tim Bishop, Assistant Director Strategic Commissioning Adult Social Care | Tel. 01733 748444 01733 748422 |

OLDER PEOPLE'S ACCOMMODATION STRATEGY - 2012

| R E C O M M E N D A T I O N S | |
|---|---------------------|
| FROM : Executive Director of Adult Social Care | Deadline date : N/A |
| <ol style="list-style-type: none"> 1. That Cabinet approves the refreshed Peterborough Older People's Accommodation Strategy (as attached at Appendix 1) and; 2. Authorise consultation with residents and families, and appropriate staff, on the proposed closure of the two care homes: Greenwood House and Welland House. | |

1. ORIGIN OF REPORT

- 1.1 This report is submitted to Cabinet following a review of the Strategy for Older People's Accommodation and Housing Related Support Services for Peterborough (2007).
- 1.2 The original strategy was agreed by Cabinet in June 2007 and a further report recommending next steps was approved by the Cabinet in February 2010. That report outlined the closure plans for three care homes, the development of extra care housing and identified that services at Greenwood House and Welland House would need to be provided elsewhere in due course.

2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to seek approval from Cabinet for the attached Peterborough Older People's Accommodation Strategy 2012 and for Cabinet to agree adoption of the strategy and consequent consultation on the proposed closure of the two care homes: Greenwood House and Welland House.
- 2.2 This report is for Cabinet to consider under its Terms of Reference No. 3.2.4, to promote the Council's corporate and key strategies and Peterborough's Community Strategy and approve strategies and cross-cutting programmes not included within the Council's major policy and budget framework.

3. TIMESCALE

| | |
|---|----|
| Is this a Major Policy Item/Statutory Plan? | NO |
|---|----|

4. PETERBOROUGH OLDER PEOPLE'S ACCOMMODATION STRATEGY

4.1 In 2007, Cabinet adopted the Strategy for Older People's Accommodation and Housing Related Support which approved the development of a range of services to help people to remain in their own homes for as long as possible, to develop extra care housing as a high quality option for people needing higher levels of care and support, and to ensure appropriate specialist services are in place to meet local needs.

4.2 Since that time the Council has continued to commission Extra Care Housing, with The Spinney in Eye opening in April 2011. We now have over 230 Extra Care places in Peterborough with plans for more.

4.3 The refreshed strategy reviews the previous plans and updates them. It outlines the Council's plans for the accommodation needs of older people in Peterborough who require support from social care to live their lives. It builds on the 2007 strategy when people told us as part of that consultation:

"Over 90% (of people) confirmed their wish to remain at home and be supported to do so, through the provision of aids and home adaptations wherever possible. Over 90% identified extra-care or supported housing as their preferred option if remaining in their current home became too difficult. At the same time, the vast majority recognized the continuing need for care home provision for the minority with particularly high levels of dependency/complex needs." (page 16, 2007 strategy).

4.4 The Peterborough Older People's Accommodation Strategy 2012 is a brief and informative document that updates the 2007 strategy taking forward the plans and actions that were agreed at that time. It is entirely consistent with the plans and actions identified and agreed in 2007, but updates the context and refreshes the actions now needed. The updated strategy acknowledges the move of Adult Social Care back to the Council and the changed economic circumstances in which we now live and work.

4.5 The centre of the strategy is the Council's Adult Social Care vision for people in Peterborough:

- Promote and support people to maintain their independence
- Deliver a personalised approach to care
- Empower people to engage with their communities and have fulfilled lives

4.6 The Purpose of the Strategy:

- To understand the progress in the development of Peterborough's accommodation options;
- To provide clear direction and targets for future housing developers;
- To improve opportunities for people to live in suitable accommodation based on their current and potential future needs;
- To ensure people are able to access stable life long accommodation with their own tenancy, part ownership or full ownership;
- To promote choice;
- To promote care at home and avoid admissions to hospital or long-term residential care; and
- To ensure choice and a stable environment at end of life care.

4.7 The Desired outcomes of the Strategy:

- Older People are provided with the right information in the right way to enable them to make real choices about their housing and accommodation;
- There is a range of appropriate accommodation available;

- The market is responsive and provides good quality accommodation at realistic and competitive prices; and
- People are supported to live where they want and to make choices which are right for them.

4.8 The Strategy sets out information about:

- Peterborough;
- Adult Social Care Commissioning;
- Current Housing Choices;
- The costs of support;
- What is needed in the future;
- Future plans; and
- Knowing we are making a difference (performance management).

4.9 It is important that Cabinet notes the demographic projections set out in the strategy, which specifically include:

- a growth in the population aged 85 and over between 2008 and 2012 of some 400 people;
- a significant growth in the numbers of older people in Peterborough over the next 10-15 years (data from the Joint Strategic Needs Assessment); and
- The number of people with dementia living in Peterborough increasing by just under 200 from 2010 to 2015 and by another 260 by 2020. (Dementia UK Report, Alzheimer's Society, 2007)

5. IMPLEMENTATION OF THE STRATEGY

5.1 Modern expectations of provision in care homes are set out in the Care Quality Commission's (CQC) standards for people who need residential care as follows:

- Designed and adapted so that people can move around and be as independent as possible in activities of daily living, and meet the appropriate requirements of the Disability Discrimination Act 1995
- Have sufficient toilets, and where necessary bathroom and bathing facilities, that take into account people's diverse needs and promote their privacy, dignity and independence
- That individual rooms are of a size and shape that supports their lifestyle, care, treatment and support needs and enables access for care, treatment and support and equipment.

5.2 In order to meet these standards the Council is continuing to work with partners to commission Extra Care Housing, for example Cross Keys will be on site in Stanground later in the summer to begin work on a new Extra Care home which will provide just under 80 new Extra Care units and a full range of modern facilities.

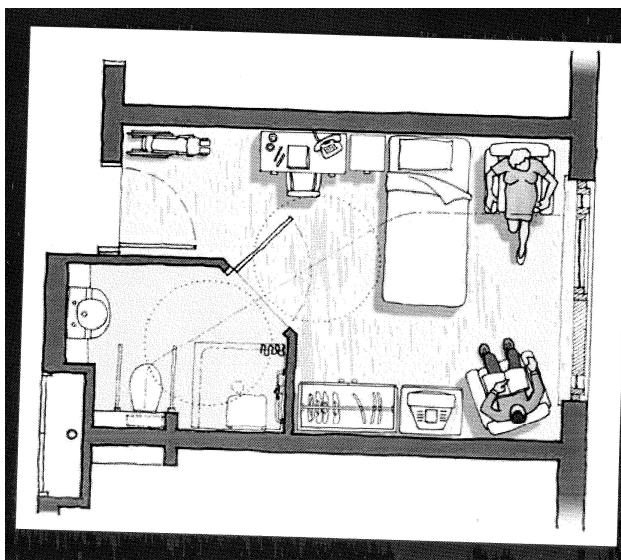
5.3 The Council will continue to commission from the independent sector and ensure good quality services in line with the CQC standards are available in Peterborough, taking into account the wishes of the residents and their families.

5.4 There is good provision within the independent sector in Peterborough, which meets the CQC standards. For example, owners of such homes have given descriptions of their facilities as follows:

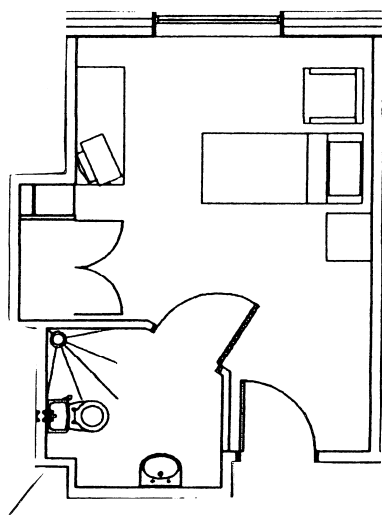
'... provides a range of rooms all of which exceed the government's guideline on space and all 86 rooms are equipped with en-suite walk-in showers, WC's and flat screen TV's.'

'Our bedrooms are all furnished to a high standard and each one has colour coordinated soft furnishings, all selected by our experienced interior designer. Each room has en-suite facilities, a remote controlled television, 24-hour call system, telephone points, thermostatic radiators and smoke detectors, as well as views onto the beautiful gardens.'

5.5 A typical room plan for a modern residential care home is shown below:



5.6 Details taken from plans for a new build private care home in Peterborough show that the room size is approximately 25 m² as shown below on the plan, and this does not include the en suite facilities:

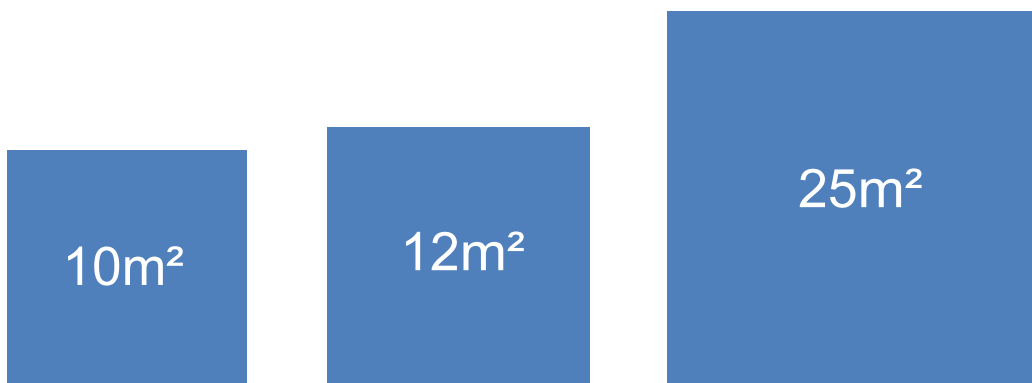


5.7 For this particular new build, the owner points out that particular attention has been paid to issues such as:

- The large bay window at waist height for optimum viewing ability;
- The resident chair located next to the window to allow natural light for reading;
- The bed position which allows the resident when in/on the bed to have views both out of the window and out of their door if this is open, it also allows staff to have a glancing view in without having to intrude;
- The circulation around the bed, particularly for wheelchair access;

- The built in double wardrobe which prevent the risk of a standing object, it allows a lot more room and, being double, gives the resident far more capacity to store;
- The en – suite door angle should always open away from the resident and not into the resident;
- The built in fridge which allows either the resident or visitors to store items such as milk, cold drinks, snacks

5.8 The diagram below shows comparative room sizes:



5.9.1 The Council wishes to ensure that there is a Peterborough standard and that all new build homes exceed the minimum CQC standard room size of 12m² (excluding en-suite), provide en-suite facilities and also meeting the amenity space requirement of at least 4.1m² per resident to provide the kind of spaces needed for activities such as:

- Physical activity and keep fit
- Cooking classes
- Reminiscence work
- Watching films
- Space to wander in a safe environment for people with dementia
- Safe outdoor space for all residents, including for people with dementia

6. GREENWOOD HOUSE AND WELLAND HOUSE

6.1 Greenwood has 38 beds and 18 day care places. There are four permanent residents, 12 beds used as interim beds and 22 people per week (at different times) using the day care facilities. During the last 12 months the use of interim beds has been approximately 90%. Seventy four staff are employed at Greenwood of which 68 are residential staff and six are day care staff.

6.2 Welland has 48 beds and 24 day care places. There are 29 permanent residents and 47 people using day care per week (at different times). Ninety three staff are employed at Welland of which 85 are residential staff and eight are day care staff.

6.3 The homes are also used for respite care by about 80 people. On an annual basis this accounts for about 550 weeks of respite care.

6.4 Whilst offering appropriate standards of care and meeting residents needs, the two remaining 'in house' residential care services offer poor standards of accommodation, including:

- Limited private space that restricts the amount of personal furniture and belongings a resident can furnish their room with;

- Small bedrooms (room sizes which vary from 8-10m² and 16m² for shared rooms) which do not meet new building standards, and make moving someone who needs assistance difficult as many of the rooms will only allow for a bed against one of the walls;
 - The small bedrooms also make the use of a hoist where necessary, difficult;
 - Greenwood having no en-suite facilities and people using commodes in their room;
 - Welland only having four en-suite room in a home that is registered for 48 people;
 - Communal spaces which are limited and do not afford adequate space for wandering safely;
 - Outdoor spaces which are not contained and not part of the home eg. many newer built homes have internal courtyards or special patio and terrace areas where people can wander or sit; and,
 - Out of date buildings that require significant upkeep and maintenance due to their age.
- 6.5 Staff and managers at Greenwood House and Welland House have had to provide care in a challenging environment for some time. This has led to issues being raised by CQC about quality of service provided in the past, although these issues have all now been addressed.
- 6.6 The Council has considered how the physical make up of these two homes might be improved, and has looked at remodelling and rebuilding as options. Current standards for new build residential care require a minimum of 12m² for single rooms (significantly larger than the present room sizes which vary from 8-10m² and 16m² for shared rooms) but if remodelling or rebuilding the Council would want to ensure that rooms exceeded this minimum standard.
- 6.7 Initial calculations using the Davis Langdon Mini Cost Model – Nursing Homes tool as a guide indicates that the rebuild costs for the two homes would be circa £2.2m, just for the build costs, with additional costs of demolition and fitting out with items such as beds, furniture and equipment.
- 6.8 Comparing the facilities that are currently available in Greenwood House and Welland House with what the independent sector in Peterborough can currently offer, leads to the conclusion that the Strategy demands that the Council achieves a better outcome for people who need residential care. There are facilities readily available which provide an environment where the physical and emotional wellbeing of residents is better served than is currently possible in these two homes.
- 6.9 The Council could consider remodelling and rebuilding the two homes, however the cost of doing so is significant, and there is no need to do so at present, because there is currently sufficient provision of an appropriate standard elsewhere. It should be noted that remodelling or rebuilding would result in residents having to move out of the homes during the works, so this is not an option that would prevent any disruption for residents. It remains possible that in the longer term, additional very specialist residential services for people whose needs cannot be met in extra care housing or standard residential care might become necessary, but there is sufficient provision for the short to medium term, and this will be kept under review.
- 6.10 Having considered all the options available, Cabinet is asked to authorise consultation with residents and families, and appropriate staff on the proposed closure of the two care homes.

7. CONSULTATION

- 7.1 If the recommendation to consult on the proposed closure is approved the Council will consult with all the people who use the homes: permanent residents; day care users; interim care users and respite users and with their families, family carers and independent advocates. It will also ensure that specialist social work staff are available to advise and

assist with any questions and concerns on a one to one basis. Specialist advocates will also be made available to support people.

7.2 After appropriate consultation, if the decision is to close the homes, the Council will:

7.2.1 work individually with each person using residential care to ensure they are able to move to a service which meets their needs, at no additional cost to them;

7.2.2 work individually with each person using day care services to offer them a range of choices that meet their needs;

7.2.3 offer the opportunity for any resident or day care user who wishes to do so to move together in a group or with a friend;

7.2.4 extend the respite and interim care beds currently commissioned from the independent sector and increase the numbers already commissioned to offer wider choice of home, and location;

7.2.5 consult fully with all staff, in a way that meets statutory requirements and also supports staff through this period of uncertainty. This consultation will include all staff currently employed in older people's day care services (26 people), not just the 14 staff employed on the combined sites providing a stand alone day care service, as they will need to be treated as a single group. Adult social care managers supported by HR colleagues will run this consultation process and support staff through it;

7.3 While there is limited national guidance on covering changes to residential care, these recommendations take into account recent ADASS guidance and Social Care Association guidance, and the significant case law covering changes to residential services. In line with guidance and case law the Council will ensure that due process is followed in relation to:

- Consultation and engagement;
- Review and risk assessment of each individual resident's circumstances and needs;
- Compliance with the Mental Capacity Act to ensure those without capacity to make their own decisions are properly supported, that decisions are made in their best interests and that their rights are protected;
- Choice of where to move to (every permanent resident affected will have a guaranteed place at no extra cost);
- A sensitive approach taking account of how difficult change and moving home can be, particularly for older people; and
- Appropriate communication and information to those affected and to stakeholders.

7.4 To fulfil its obligations set out above, the Council will ensure dedicated social workers are allocated to residents and have full discussions with them and their family, friends and advocates about the options being considered. It is possible that this process may present an opportunity for a resident to move nearer to family or to think about a care home in an alternative area if they wish to do so.

7.5 For those residents who don't have regular contact with family or friends the Council has commissioned Age UK Peterborough to allocate advocates to work with residents and ensure that their views are heard as part of the consultation.

8. FINANCIAL CONSIDERATIONS

8.1 The unit cost of in-house residential provision is significantly higher than that which can be obtained in the independent sector. Whilst both homes remain open the additional cost to the Council per month, compared to external provision, is £146,000.

- 8.2 In terms of Day Care provision the assumption is that the cost of provision in the external sector will be covered by existing budgets for Day Care in Greenwood House and Welland House.
- 8.3 If the decision is to close the two homes, there will be a significant one off cost of redundancies of staff which is expected to be in the region of £1.65m. Redundancy costs will be covered through the Council's Capacity Fund.
- 8.4 If, after consultation, the decision is to close the two homes, their availability for development will provide a potential capital receipt for the Council. The Capital Programme for Adult Social Care contains £6m which is potentially available for the provision of Extra Care and other provision in line with Older People Accommodation Strategy.

9. ANTICIPATED OUTCOMES

- 9.1 That this refreshed strategy provides a clear direction for the provision of accommodation for older people that meets the Care Quality Commission's standards.

10. REASONS FOR RECOMMENDATIONS

- 10.1 The previous strategy is now five years old and needs to be updated, taking into account modern standards and expectations of care provision for older people.
- 10.2 The Council needs to ensure people have access to good quality residential and nursing care in fit for purpose surroundings, which support staff and managers to meet people's individual personalised needs.

11. ALTERNATIVE OPTIONS CONSIDERED

- 11.1 The homes to continue to provide a residential service with no changes. This was rejected because the resident room sizes are small and do not meet modern standards, or the quality of provision that the Council wishes to provide for older people.
- 11.2 The homes to be sold as a going concern. This option has been rejected because the costs of running the homes and the improvement costs would not make them viable businesses to sell.
- 11.3 The homes be developed and improved. Significant costs would be incurred to improve the homes and it may be more cost effective to demolish and rebuild them. Initial cost modelling indicates that for the two homes, with like for like built on modern standards, the build cost alone would be circa £2.2m, with additional costs of demolition and fitting out. Given the national data and the number of rooms resulting it is unlikely this would be a cost effective option and would still require residents to leave the homes while work was undertaken.

12. IMPLICATIONS

- 12.1 Financial: Better value for money can be achieved by purchasing care home places needed within the independent sector. Given the age and condition of the in-house properties a better physical quality of accommodation can also be achieved by people being in modern homes with larger rooms and en-suite facilities.
- 12.2 Discrimination and Equality: Older people often feel discriminated against on the grounds of age (one of the protected groups within equality legislation). This strategy aims to ensure that older people have choice and access to quality accommodation.

12.3 Legal: this strategy is legally compliant and any consultation process with regards to the proposed closure of the two homes will follow good practice and available guidance.

12.4 The council will need to carefully consider the best use of the sites vacated by the two care homes. Additional extra-care provision is identified within the strategy and one of these sites might be used to provide extra care housing particularly for people with high or complex needs eg. dementia, stroke care.

13. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985)

Older People's Accommodation and Housing Related Support Strategy 2007

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Adult Social Care Older People's Accommodation Strategy

1. Introduction
2. About Peterborough
3. Adult Social Care Commissioning
4. Current Housing Choices
5. The costs of support
6. What is needed in the future?
7. Future plans
8. Knowing we are making a difference (performance management).

1. Introduction

- 1.1 This strategy outlines our plans for the accommodation needs of older people in Peterborough who require support from social care to live their lives. It refreshes the 2007 strategy when people told us as part of that consultation:

“Over 90% (of people) confirmed their wish to remain at home and be supported to do so, through the provision of aids and home adaptations wherever possible. Over 90% identified extra-care or supported housing as their preferred option if remaining in their current home became too difficult. At the same time, the vast majority recognised the continuing need for care home provision for the minority with particularly high levels of dependency/complex needs.” (page 16-2007 strategy).

- 1.2 At the centre of the strategy is the adult social care vision for people in Peterborough:

Our priorities:

- Promote and support people to maintain their independence
- Delivering a personalised approach to care
- Empowering people to engage with their communities and have fulfilled lives

- 1.3 This strategy sets out how we will support people to remain as independent as possible and make real choices about their lives – in line with the aims of ‘Our Health, Our Care, Our Say’ (DH 2006); ‘Putting People First: a shared vision and commitment to the transformation of adult social care’ (DH 2007); ‘Think Personal, Act Local’ (DH 2010), ‘A Vision for Adult Social Care : Capable Communities and Active Citizens’ (DH 2010) and ‘Laying the Foundations’: The Government’s National Housing Strategy for England (see Appendix 1 for a fuller list of publications). These emphasise the importance of independence, enabling people to live their own lives as they wish, make choices, and take risks within a market that provides high quality services that are appropriate to peoples’ needs.

- 1.4 In Peterborough we have developed the ‘Living My Life’ programme to take personalisation, choice and control forward. This accommodation strategy is set out as part of that programme, which supports how we deliver all adult social care in Peterborough. The programme identifies that everyone should be able to:

- Live as independently as possible
- Make their own choices to achieve their personal goals and aspirations
- Take appropriate risks
- Live their lives free from abuse and neglect
- Maximise their health and well-being.

- 1.5 This strategy is underpinned by a range of documents, including local previous accommodation strategies, government guidance and best practice including:

- Peterborough’s Older Peoples’ Accommodation Strategy (2007)
- National Dementia Strategy – Living Well with Dementia (2009)
- End Of Life Strategy (2008)
- Local Decisions – A fairer future for social housing (2010)
- Valuing people Now (2009)

- Peterborough's Joint Strategic Needs Assessment (2011)

1.6 What is the Purpose of the Strategy?

- To understand the progress in the development of Peterborough's accommodation options;
- To provide clear direction and targets for future housing developers;
- To improve opportunities for the people to live in suitable accommodation based on their current and potential future needs;
- To ensure people are able to access stable life long accommodation with their own tenancy, part ownership and full ownership;
- To promote choice;
- To promote care at home and avoid admissions to hospital or long-term residential care; and
- To ensure choice and a stable environment at end of life care.

1.7 What are the desired outcomes?

- Older People are provided with the right information in the right way to enable them to make real choices about their housing and accommodation;
- There is a range of good quality appropriate accommodation available;
- The market is responsive and provides good quality accommodation at realistic and competitive prices; and
- People are supported to live where they want and to make choices which are right for them.

2. About Peterborough

2.1 Population projections point to a significant growth in the numbers of older people in Peterborough over the next 10-15 years. There has already been growth of some 400 people in the older population aged 85 and over between 2008 and 2012.

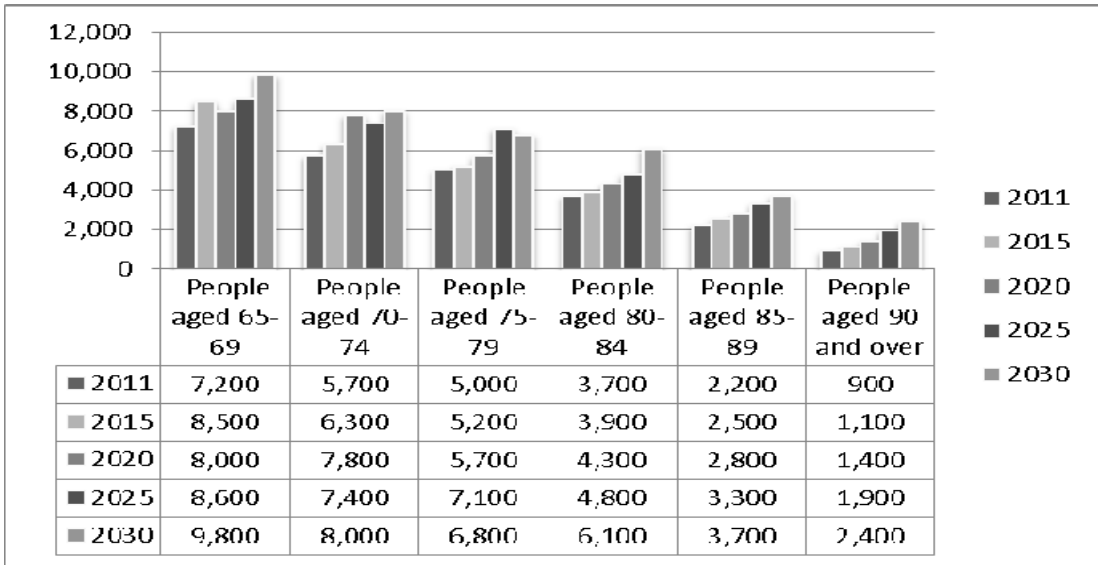
Peterborough Annual Population Projections by Age Group to 2021

Peterborough Resident Population Projections by age group to 2021

| Year | Thousands | | | | | | | | | | | | | |
|-------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
| 0-19 | 43.7 | 43.9 | 44.2 | 44.5 | 44.8 | 45.1 | 45.7 | 46 | 46.5 | 46.9 | 47.5 | 48 | 48.5 | 49.1 |
| 20-44 | 63.4 | 63.8 | 64.1 | 64.6 | 64.9 | 65.1 | 65.5 | 65.9 | 66 | 66.3 | 66.4 | 66.8 | 67.1 | 67.3 |
| 45-64 | 39.4 | 40 | 40.5 | 41.1 | 41.4 | 42 | 42.5 | 43 | 43.5 | 44 | 44.6 | 44.8 | 45.1 | 45.4 |
| 65-74 | 12.2 | 12.4 | 12.6 | 12.9 | 13.6 | 14 | 14.4 | 14.8 | 15.1 | 15.4 | 15.5 | 15.7 | 15.8 | 15.9 |
| 75-84 | 8.3 | 8.4 | 8.5 | 8.7 | 8.8 | 8.8 | 8.9 | 9.1 | 9.1 | 9.3 | 9.4 | 9.8 | 10 | 10.3 |
| 85+ | 2.8 | 2.9 | 2.9 | 3.1 | 3.2 | 3.3 | 3.5 | 3.6 | 3.7 | 3.8 | 3.9 | 4 | 4.2 | 4.4 |
| Total | 169.8 | 171.4 | 172.8 | 174.9 | 176.7 | 178.3 | 180.5 | 182.4 | 183.9 | 185.7 | 187.3 | 189.1 | 190.7 | 192.4 |

Source: ONS Sub-national Population Projections, mid 2008

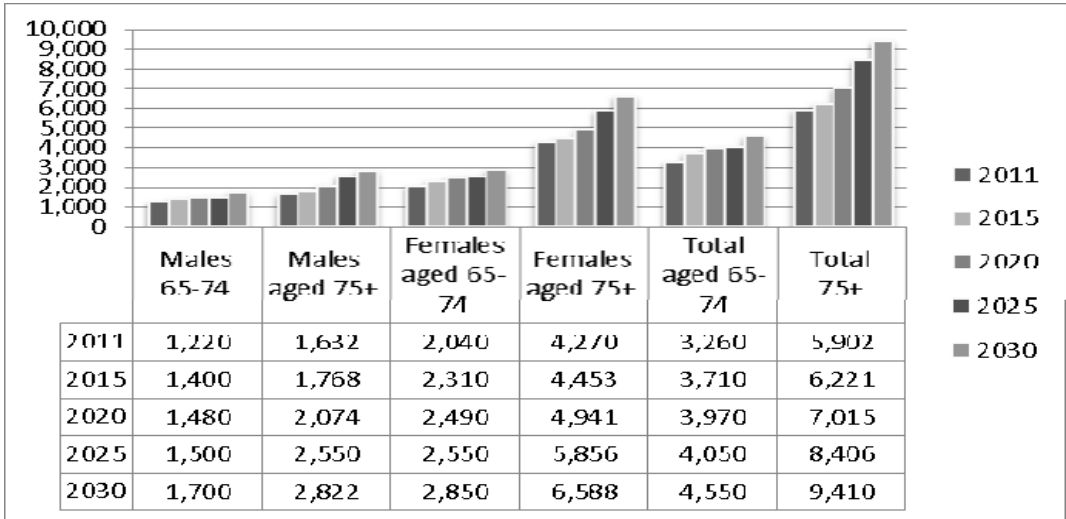
2.2 By 2016, there are expected to be 30,600 people over the age of 65 living in Peterborough with 4,400 of those being over the age of 85. .



Peterborough Older People Population projections

2.3 The number of people with dementia (including early onset) living in Peterborough will increase from 1,686 in 2010 to 1,882 in 2015 and 2,142 in 2020 – an increase of 27% over the next ten years. The largest increase is expected to be seen in women, increasing from 1,074 currently (2010) to 1,309 in 2020 (Dementia UK Report, Alzheimer’s Society, 2007).

2.4 The numbers of people living alone will also increase. The table below sets out data on populations of older people predicted to live alone.



2.5 The table below sets out ethnicity data for Peterborough for the whole population and for those over 65 years.

| Experimental Ethnic Group estimates for Peterborough, Persons | | | | |
|---|--------------|-------|--------|-------|
| | Peterborough | | | |
| | All ages | | 65 + | |
| | Number | % | Number | % |
| White: British | 134,200 | 82.2 | 24,300 | 89.3 |
| Asian or Asian British: Pakistani | 7,400 | 4.5 | 400 | 1.5 |
| White: Other White | 6,000 | 3.7 | 1,000 | 3.7 |
| Asian or Asian British: Indian | 4,400 | 2.7 | 400 | 1.5 |
| Black or Black British: African | 1,800 | 1.2 | 100 | 0.4 |
| White: Irish | 1,500 | 0.9 | 500 | 1.8 |
| Black or Black British: Caribbean | 1,300 | 0.8 | 200 | 0.7 |
| Asian or Asian British: Other Asian | 1,200 | 0.7 | 100 | 0.4 |
| Mixed: White and Black Caribbean | 1,000 | 0.6 | 0 | 0.0 |
| Chinese or Other Ethnic Group: Other Ethnic Group | 1,000 | 0.6 | 0 | 0.0 |
| Mixed: White and Asian | 900 | 0.6 | 0 | 0.0 |
| Chinese or Other Ethnic Group: Chinese | 800 | 0.5 | 0 | 0.0 |
| Mixed: Other Mixed | 700 | 0.4 | 0 | 0.0 |
| Mixed: White and Black African | 300 | 0.2 | 0 | 0.0 |
| Asian or Asian British: Bangladeshi | 300 | 0.2 | 0 | 0.0 |
| Black or Black British: Other Black | 300 | 0.2 | 0 | 0.0 |
| White | 141,700 | 86.8 | 25,800 | 94.9 |
| Mixed | 3,000 | 1.8 | 100 | 0.4 |
| Asian or Asian British | 13,300 | 8.1 | 900 | 3.3 |
| Black or Black British | 3,500 | 2.1 | 300 | 1.1 |
| Chinese or Other Ethnic Group | 1,800 | 1.1 | 100 | 0.4 |
| All Ethnic Groups | 163,300 | 100.0 | 27,200 | 100.0 |

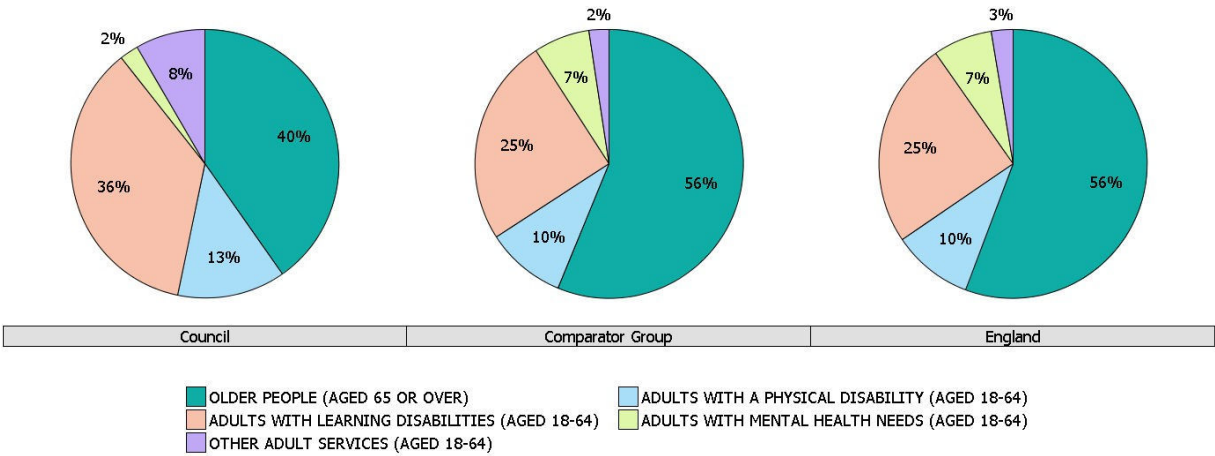
Source: ONS Experimental Population Estimates by Ethnic Group, June 2007

2.6 There are still significant health inequalities in life expectancy within Peterborough - parts of Central, East and Paston wards have the highest poverty levels for older people. There are a growing number of vulnerable people independently funding their own care.

2.7 The numbers of people supported in permanent residential care has fallen by 26% between 2007-08 and 2009-10 (significantly lower rates than our comparator local authorities or the national average) but we also have significantly higher availability of extra care housing per 10,000 of the population aged 65+.

Peterborough Adult Social Care Expenditure 2010-11 Report

Percentage distribution of total gross current expenditure on adult social services by client group 2010-11 (note: percentages have been rounded so may not add up to 100%).



3. Adult Social Care Commissioning

- 3.1 2012 saw the return of ASC from the PCT to the City Council. As part of that move a new ASC department has been created within the council - a commissioning ASC department. Working with other council departments, the council's strategic partners and wider partners within the city, including the voluntary and independent sectors as well as housing providers, we are reviewing the way ASC is commissioned in Peterborough.
- 3.2 There is national agreement that the current pattern of commissioning and delivering services is unsustainable as it will not meet the expectations of future service users, and the workforce requirements and costs of increased demand for residential and home care cannot be achieved or afforded.
- 3.3 'Fairer Care Funding – The Report of the Commission on Funding of Care and Support' (Dilnot Commission Report) 2011 highlighted that the current funding system is in urgent need of reform: it is hard to understand, often unfair and unsustainable
- 3.4 People want to remain at home with care and support if possible, and support for family carers is recognised as a key element of service provision to enable this.
- 3.5 The aims and outcomes set out in the government White Paper 'Our health, our care, our say' (2006) signaled the Government's intention to shift the emphasis of health and social care from acute and intensive services towards prevention, health promotion and community services. Better prevention, more choice, tackling health inequalities and support for people with long term needs were the main goals.
- 3.6 'Putting People First' (DH 2007) later identified the government's vision and commitment to the transformation of adult social care. The document calls for system wide transformation, developed and owned by local partners. The key values that sit behind this policy relate to quality of life and 'the equality of independent living' which are seen as 'fundamental to a socially just society'. The transformation required means a shift from paternalistic, reactive care to a new mainstream system that is

focused on early intervention, reablement, prevention, and high quality personally tailored services.

3.7 Adult Social Care in Peterborough is being re-shaped based on The vision for quality in social care ('A Vision for Adult Social Care: Capable Communities and Active Citizens', DH 2011) and on the outcomes framework principles including: prevention; personalisation; partnership; and providing protection.

3.7.1 The document highlights the importance of ensuring that the variety of people's needs is matched by a diversity of support within a broad market of high quality provision. The vision endorses the role of councils working to develop markets with the full engagement of people with support needs, their carers and families and a wide spectrum of providers:

"Social care already involves a diverse range of providers, including the voluntary and private sectors, but more can be done to make a reality of our vision of a thriving social market in which innovation flourishes. Councils have a role in stimulating, managing and shaping this market, supporting communities, voluntary organisations, social enterprises and mutual to flourish and develop innovative and creative ways of addressing care needs. Local government has already made great strides towards developing local services with their local communities and voluntary organization.." (paragraph 5.2).

3.8 The success of market shaping will depend on strong partnerships, shared risks and a willingness and ability by commissioners and providers to put people with support needs, their carers and families, in the driving seat. If councils are to lead the way in shaping local markets they will need to develop approaches that empower people to set the direction for change, and work closely with suppliers in the independent and third sectors to better understand their capacity and capability, so that innovation and best value are most effectively incentivised.

3.9 The challenges are significant and are described in the ADASS publication 'The Case for Tomorrow Facing the Beyond' (ADASS 2012):



4. Current Housing Choices

- 4.1 There are currently a number of accommodation types in Peterborough for older people who need different levels of support. These mirror what is available nationally.
- 4.2 Own home – people living in their own homes and are supported to help them to continue to live as independently as possible in their own home. While many people may make their own arrangements for support and pay for it themselves, there are currently just over 1,600 people with an ASC personal budget purchasing support to live at home.
- 4.3 Sheltered Housing - housing tends to be in a scheme of about 20 to 40 self contained flats or bungalows. There is almost always an alarm system and most schemes have an accommodation scheme manager. In Peterborough we currently have a range of schemes offering 1747 places.
- 4.4 Extra Care Schemes – these schemes tend to be larger than sheltered schemes and provide direct access to a care provider 24/7. All schemes have an accommodation scheme manager. In Peterborough we currently have five schemes offering 237 places.
- 4.4.1 The five extra care schemes in Peterborough have a capacity of 223 units. Excluding first occupations at The Spinney (a new scheme opened in 2011), 48 units became vacant during the year. This amounted to a 20% stock turnover, which is lower than during 2010/11.
- 4.4.2 One hundred and fifteen people joined the Extra Care Housing Register during 2011/12, and on 31st March 2012, 52 people were still on the EC Register awaiting an offer of Extra Care accommodation. Assuming the same number of people seek Extra Care housing during 2012/13 as in 2011/12, and the void turnover creates 46 vacancies, the number of people on the register could more than double, with 121 applicants on the Extra Care register on 31st March 2013.
- 4.4.3 Cross Keys Homes will shortly commence construction of a 79 unit Extra Care scheme in Stanground. This additional supply of units should help to reduce the number of applicants on the EC register.
- 4.5 Care Homes – including residential and nursing homes – Peterborough has 821 beds available in 17 homes within the City. Plans are underway to break ground this year for an additional care home providing 50 beds. This is a local independent provider who already has a presence in Peterborough.
- 4.6 Since November 2011 we have been collecting weekly vacancy levels in all the independent sector homes we purchase beds from in Peterborough. On average each week during this high need period there have been a total of 56 beds available, which has included just over 16 residential beds, 15 nursing beds and 25 dually registered residential/dementia beds.
- 4.7 A snapshot on 14th May 2012 showed 60 available beds of which 29 were registered for dementia or residential care, 19 for residential care and 12 for nursing care. All but 1 nursing bed and 3 residential beds were open to purchase by the council at our agreed rates.

4.8 The two homes still run by the council have 86 beds and 24 vacancies and were not included within the independent sector count in 4.7 above.

5. The costs of support

5.1 Laing & Buisson health and care market reports provide authoritative data and in-depth analysis of the UK health and care market.

Nationally the average cost of residential and nursing care for over 65s is £526 per week, including independent as well as council provided care. The average cost of residential care is nationally £522; however, when it is provided by a council, the cost is a national average of £895 per week compared to £470 when provided by others. (Personal Social Services: Expenditure and Unit Costs - England 2010-11 - Final Release - The information Centre 2012).

5.2 In Peterborough our current fee levels per week are set at:

| | |
|----------------------|---------|
| Residential | £387.03 |
| Residential/dementia | £440.58 |

These are in line with our neighbouring authorities and agreed with our local care home providers.

5.3 The two homes run by the council – based on current running costs and if they had no voids and continued to operate with the same number of beds – would have weekly costs of:

| | |
|-----------------|---------|
| Greenwood House | £714.89 |
| Welland House | £665.94 |

6. What is needed in the future?

6.1 The Case for Tomorrow sets out eight areas that need to be addressed which include:

- A range of different types of housing which allows people to remain at home as long as they wish
- Real choice and control over services which are fairly priced and affordable

| | | |
|--|--|---|
| Effective prevention in supportive communities which promote good health, wellbeing and involvement. | Community health and care services working together to aid recovery and provide ongoing support to reduce the need for acute care. | A range of different types of housing which allows people to remain at home as long as they wish. |
| Good quality information and advice and straightforward access to health, care and support services. | THE CASE FOR TOMORROW | Better recognition and support for carers, particularly for older carers. |

| | | |
|---|---|---|
| Safe, good quality services from reliable and skilled people. | Real choice and control over services which are fairly priced and affordable. | Services which are effective, efficient and accessible when and where needed. |
|---|---|---|

6.2 It goes on to identify a way forward (8.3):

- Better planning for the likely future demand for housing suitable for older people, including greater co-ordination between the planning authority and social and health care.
- Health and wellbeing boards with a better understanding of what good housing can deliver, and with access to planning specialists.
- Strong local commitment to accessible housing and good neighborhood design that supports older people remaining within the community.
- Local authorities working with RSLs to review the local sheltered housing stock, and ensure that all provision over time can be fully accessible for the delivery of health and care services.
- Specialist housing for older people which can also support people with dementia.
- Investing in new designs and technology in aids and adaptations which support older people and carers to remain at home.
- Establishing local targets for private sector extra care housing proportionate to home ownership by older people.

6.3 'Laying the Foundations', the Government's national Housing Strategy for England, sets out a number of key themes which relate to older people, including:

- The introduction of a 'New Deal for Older People', to help older people to continue living comfortably in their own homes;
- the need for communities to have more say over new housing developments in their own area to ensure they meet local needs, including the needs of older people; and
- the importance of good accessible design in both housing and in neighbourhoods, to enable older people to remain independent and included in their communities.

6.4 It is estimated that people aged 65 and over in local authority residential care, independent sector residential care, and nursing care during the year, purchased or provided by Peterborough City Council will be:

| | 2011 | 2015 | 2020 | 2025 | 2030 |
|---------------|------|------|------|------|-------|
| Peterborough: | 731 | 814 | 888 | 979 | 1,089 |

While the actual numbers for Peterborough in 2011 are likely to be about 100 less – this does give an indication of need into the future (from the Peterborough JSNA).

- 6.5 Given the levels of residential/nursing beds provided in the independent sector in Peterborough, people's wish to remain at home longer, and the additional planned residential care beds and extra-care housing being available in the next 2 years – it is unlikely that we will require additional residential care beds in the near future. We may however require additional dementia care and in particular extra care dementia care. We have begun to talk to providers about developing this.
- 6.6 As part of this strategy we would want to move to a Peterborough standard for new residential care developments, ensuring CQC standards are seen as a minimum and aim for room sizes of 25 m², all en-suite provision and buildings which allowed for a modern and good quality service to be provided.

7. Future plans

- 7.1 In Chapter Five of the 2007 strategy the key objectives were set out to:
- Meet the needs of older people in general needs accommodation;
 - Make better use of existing sheltered housing and encourage the rationalisation of existing provision; and
 - Work in partnership with the PPCT and others to:
 - facilitate investment in Extra Care/Very Sheltered Housing
 - facilitate the provision of sufficient care home provision for older people, including those with mental health needs
 - facilitate the provision of sufficient short-stay, intermediate care residential nursing rehabilitation resources to enable timely hospital discharge and avoid unnecessary hospital admissions;
 - facilitate the provision of adequate capacity for short-term breaks (respite care)
- 7.2 These were further defined as:
- 7.2.1 Ensure good quality and effective advice and information services (and materials) are available to support older people in making choices about future options. The needs of Peterborough's BME communities should be reflected in this approach.
- 7.2.2 Maximise the availability of adaptable (lifetime homes standards), affordable housing options for older people through ensuring the needs of this section of the community are fully represented in negotiations with developers and through the PCC Planning Obligations Strategy. This is in line with emerging practice.
- 7.2.3 Review the level of demand and current level of funding for Disabled Facilities Grants to ensure adequate growth provision is planned for – a key element of promoting independence. Part central government funded, part locally funded.
- 7.2.4 Regularly review the level of demand and current resources for minor aids and adaptations, and access to the services of Home Improvement Agencies (HIAs) to ensure adequate growth provision is planned for. This will have clear links to the assistive technology initiatives already in place.
- 7.2.5 Review of the current regime for linking Supporting People funding to housing schemes/services, and develop a joint commissioning model with PPCT for Floating Support Services. These will be tenure neutral and enable people to

access those support services traditionally associated with sheltered housing schemes. This would be funded through realignments of existing budgets.

- 7.2.6 Work with RSLs to review the continued viability and, where appropriate, possible alternative uses for all current Supported Housing Schemes located in the area served by the Council. Those unsuitable or no longer attractive to older people may offer solutions for other sections of the community.
- 7.2.7 Press forward with the plan to expand the number of extra-care housing units in line with the local calculated demand projections – a baseline of 400 units by 2011 and 500 by 2016. This is to include significant provision for people with dementia.
- 7.2.8 Refine modelling projections on the continued demand for residential care provision across all sectors – including the viability of continuing to directly provide long-stay residential care places through homes run by PPCT, and options for specialist provision.
- 7.2.9 Facilitate the growth in demand through the commissioning of short-stay and rehabilitation services and develop capacity in line with projections. This would include intermediate, interim and respite care.
- 7.2.10 Facilitate the growth in demand for nursing care provision to inform PPCT commissioning strategy. Develop capacity in line with projections. This will include provision for older people with dementia, multiple and complex needs, palliative and terminal care.
- 7.3 In relation to 7.2.8 above the 2007 strategy also noted (page 5) that ‘whilst this work will impact on all sectors providing residential care homes, there will need to be a consideration of the future role of the six directly provided care homes operated through PPCT. These decisions are strongly linked to the following two points:
- Facilitate an increase in the availability of short-stay and rehabilitation services, developing capacity in line with projections. This will include intermediate, interim and respite care.
 - Refine modelling projections on the demand for nursing care provision to inform PPCT commissioning strategy. Develop capacity in line with demand projections. This will include provision for older people with dementia, multiple and complex needs, palliative and terminal care needs.’
- 7.4 Over the last five years much work has been undertaken in these areas. There has been a significant increase in extra care housing, with flats for dementia care. We have intermediate, interim and respite care beds purchased from the independent sector. The PCT has been developing an ‘end of life’ pathway which is now in place to ensure that people who wish to die in their home are supported to do so.
- 7.5 We plan to continue with this strategy but also to refresh and update it to reflect personalisation; reablement and the new economic climate to ensure services are fairly priced, affordable and provide value for money.
- 7.6 Our refreshed plan is to:
- 7.6.1 Ensure good quality information and advice is available for all people whether they fund social care themselves or it is funded by the council;

- 7.6.2 Invest in new designs and technology in aids and adaptations which support older people and carers to remain at home (Tele care);
- 7.6.3 Better planning for the likely future demand for housing suitable for older people, including greater co-ordination between the planning authority and social and health care;
- 7.6.4 To work with the market and ensure that the needs of most older people are met within general needs accommodation;
- 7.6.5 To work with partners within the City Council and with RSLs to ensure effective use of existing sheltered housing;
- 7.6.6 To review the use of Supporting People funding to ensure it is directed in the right places to maximise outcomes for older people;
- 7.6.7 To look for new ways of creating new investment in Extra Care Housing;
- 7.6.8 To stimulate and shape the market to ensure the provision of sufficient good quality care home places for older people, including those with mental health needs, which is fairly priced and affordable;
- 7.6.9 To commission specialist housing for older people, which can also support people with dementia;
- 7.6.10 To consult on the potential decommissioning of the relatively expensive and physically outdated in-house residential care homes for older people;
- 7.6.11 To stimulate and shape the market to ensure the provision of sufficient short break places for older people including those with dementia; and
- 7.6.12 To stimulate and shape the market to ensure the provision of sufficient reablement; short-stay; intermediate care; and residential nursing resources to enable timely hospital discharge and avoid unnecessary hospital admissions.

8. Knowing we are making a difference (performance management).

- 8.1 The performance of the City Council is managed within a new Adult Social Care Outcomes Framework (ASCOF). The ASCOF consists of 4 key outcome domains. These were published in the document "Transparency in Outcomes: a Framework for Adult Social Care (DoH: March 2011).
- 8.2 The purpose of the ASCOF is for local authorities to use the framework as a basis for their own local performance management arrangements, and to assist in any local conversation concerning strengths in delivering better outcomes for people. It also allows the government to understand national trends around social care.
- 8.3 The ASCOF has four specific domains:
 - Enhancing quality of life for people with care and support needs;
 - Delaying and reducing the need for care and support;

- Ensuring that people have a positive experience of care and support;
- Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm.

8.4 The government no longer sets performance targets. However, it has published a set of “outcome measures” in the ASCOF. These 17 measures are based on pre-existing national collections and performance indicators and are collated nationally to specific standards. These performance measures will underpin the delivery of this strategy.

Appendix 1

Guidance includes:

- Our Health, Our Care, Our Say, DH January 2006
- A Vision for Adult Social Care: Capable Communities and Active Citizens (DH 2010)
- Commissioning Framework for Health and Well-Being, DH 2007
- Equity & Excellence - Liberating the NHS (NHS White Paper, July 2010)
- Fairer Care Funding – The Report of the Commission on Funding of Care and Support (Dilnot Commission Report) 2011
- Healthy Lives, Healthy People (Public Health White Paper, November 2010)
- Healthy Living, Healthy People : Transparency in Outcomes – Proposals for a Public Health Outcomes Framework (A Consultation Document, December 2010)
- Peterborough Joint Strategic Needs Assessment 2011
- Older People Accommodation Strategy 2001
- Law Commission Report – Adult Social Care (2011)
- Liberating the NHS: Legislative Framework and Next Steps
- NHS Future Forum Recommendations to Government and Government Response to the NHS Future Forum Report
- NHS Outcomes Framework
- Prioritising Need in the Context of Putting People First: A Whole System Approach to Eligibility for Social Care – Guidance on Eligibility Criteria for Adult Social Care, England 2010
- Promoting Independence, CSIP 2007
- Putting People First, DH 2007
- Statement of Government Policy on Adult Safeguarding
- Think Local, Act Personal – Next Steps for Transforming Adult Social Care
- Transparency in Outcomes: A Framework for Quality in Adult Social Care – The 2011/12 Adult Social Care Outcomes Framework
- Transparency of Outcomes: a framework for adult social care (DH 2010)
- Legislation and statutory obligations for social care services are, as follows:
- Carers (Equal Opportunities) Act 2004
- Carers (Recognition and Services) Act 1995
- Carers and Disabled Children Act 2000
- Chronically Sick and Disabled Person's Act 1970
- Community Care (Delayed Discharges) Act 2003
- Community Care Direct Payments Act 1996
- Disability Discrimination Act 1995 & 2005
- Disabled Persons (Services, Consultation, and Representation) Act, 1986
- Equality Act 2010
- Fair Access to Care Services: Guidance on Eligibility Criteria for Adult Social Care 2002
- Health & Social Care Act 2001
- Health and Social Care Act 2008
- Health and Social Care Act 2012
- Housing Act 1996
- Mental Capacity Act 2005
- Mental Health (Patients in the Community) Act 1995
- Mental Health Act 1983
- National Assistance Act 1948
- National Health Service and Community Care Act 1990
- National Health Service Act 2006
- Race Relations (Amendment) Act 2006
- Race Relations Act 1976
- Sustainable Communities Act
- The National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care 2009.

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| SCRUTINY COMMISSION FOR HEALTH ISSUES | Agenda Item No. 7 |
| 17 JULY 2012 | Public Report |

Report of the Solicitor to the Council

Report Author – Paulina Ford, Senior Governance Officer, Scrutiny

Contact Details – 01733 452508 or email paulina.ford@peterborough.gov.uk

FORWARD PLAN OF KEY DECISIONS

1. PURPOSE

- 1.1 This is a regular report to the Scrutiny Commission for Health Issues outlining the content of the Council's Forward Plan.

2. RECOMMENDATIONS

- 2.1 That the Commission identifies any relevant items for inclusion within their work programme.

3. BACKGROUND

- 3.1 The latest version of the Forward Plan is attached at Appendix 1. The Plan contains those key decisions, which the Leader of the Council believes that the Cabinet or individual Cabinet Member(s) will be making over the next four months.
- 3.2 The information in the Forward Plan provides the Commission with the opportunity of considering whether it wishes to seek to influence any of these key decisions, or to request further information.
- 3.3 If the Commission wished to examine any of the key decisions, consideration would need to be given as to how this could be accommodated within the work programme.

4. CONSULTATION

- 4.1 Details of any consultation on individual decisions are contained within the Forward Plan.

5. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

None

6. APPENDICES

Appendix 1 – Forward Plan of Executive Decisions

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PETERBOROUGH CITY COUNCIL'S FORWARD PLAN 1 JULY 2012 TO 31 OCTOBER 2012

FORWARD PLAN OF KEY DECISIONS - 1 JULY 2012 TO 31 OCTOBER 2012

During the period from 1 July 2012 To 31 October 2012 Peterborough City Council's Executive intends to take 'key decisions' on the issues set out below. Key decisions relate to those executive decisions which are likely to result in the Council spending or saving money in excess of £500,000 and/or have a significant impact on two or more wards in Peterborough.

This Forward Plan should be seen as an outline of the proposed decisions and it will be updated on a monthly basis. The dates detailed within the Plan are subject to change and those items amended or identified for decision more than one month in advance will be carried over to forthcoming plans. Each new plan supersedes the previous plan. Any questions on specific issues included on the Plan should be included on the form which appears at the back of the Plan and submitted to Alex Daynes, Senior Governance Officer, Chief Executive's Department, Town Hall, Bridge Street, PE1 1HG (fax 01733 452483). Alternatively, you can submit your views via e-mail to alexander.daynes@peterborough.gov.uk or by telephone on 01733 452447.

The Council invites members of the public to attend any of the meetings at which these decisions will be discussed and the papers listed on the Plan can be viewed free of charge although there will be a postage and photocopying charge for any copies made. All decisions will be posted on the Council's website: www.peterborough.gov.uk. If you wish to make comments or representations regarding the 'key decisions' outlined in this Plan, please submit them to the Governance Support Officer using the form attached. For your information, the contact details for the Council's various service departments are incorporated within this plan.

NEW ITEMS THIS MONTH:

Delivery of the Council's Capital Receipt Programme through the Sale of Dickens Street Car Park - KEY/03JUL/11
Delivery Strategy for South Bank & Surrounding Areas - KEY/04JUL/12
Community Infrastructure Levy (CIL) – Preliminary Draft Charging Schedule (PDCS) - KEY/01SEP/12

JULY

| KEY DECISION REQUIRED | DATE OF DECISION | DECISION MAKER | RELEVANT SCRUTINY COMMITTEE | CONSULTATION | CONTACT DETAILS / REPORT AUTHORS | REPORTS |
|--|------------------|---|--|--|---|---|
| <p>Sale of surplus former residential care home - Eye - KEY/01OCT/11 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Executive Director – Strategic Resources, the Corporate Property Officer and the Cabinet Member for Resources, to negotiate and conclude the sale of a former care home now surplus to requirement - The Croft, Eye.</p> | July 2012 | Cabinet Member for Resources | Sustainable Growth and Environment Capital | Consultation will take place with the Cabinet Member, & Ward councillors, as appropriate | Simon Webber Capital Receipts Officer Tel: 01733 384545 simon.webber@peterborough.gov.uk | A public report will be available from the Governance team one week before the decision is taken. |
| <p>Section 75 agreement with Cambridge and Peterborough Foundation Trust - KEY/03OCT/11 To approve the section 75 agreement with CPFT for the provision of mental health services.</p> | July 2012 | Cabinet Member for Adult Social Care | Health Issues | Internal and external stakeholders as appropriate. | Terry Rich Executive Director Adult Social Services (interim) Tel: 01733 758444 terry.rich@peterborough.gov.uk | A public report will be available from the Governance Team one week before the decision is taken. |

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|--|------------------|--|---|--|--|--|
| <p>Peterborough's Transport Partnership Policy for pupils aged 4-16 years - KEY/01NOV/11 To approve the new policy for September 2012.</p> | <p>July 2012</p> | <p>Cabinet Member for Education, Skills and University</p> | <p>Creating Opportunities and Tackling Inequalities</p> | <p>Internal and public consultation</p> | <p>Isabel Clark Head of Assets and School Place Planning Tel: 01733 863914 isabel.clark@peterborough.gov.uk</p> | <p>A public report will be available from the Governance team one week before the decision is taken.</p> |
| <p>Traffic Signals LED Project - award of contract - KEY/03SEP/11 Contract to replace all traffic signal head lamps in Peterborough with LED Heads.</p> | <p>July 2012</p> | <p>Cabinet Member for Housing, Neighbourhoods and Planning</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate</p> | <p>Amy Wardell Team Manager - Passenger Transport Projects Tel: 01733 317481 amy.wardell@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Cowgate Enhancement Scheme - KEY/05JAN/12 To award the contract to undertake engineering works as part of the Cowgate Enhancement Scheme.</p> | <p>July 2012</p> | <p>Leader of the Council and Cabinet Member for Growth, Strategic Planning, Economic Development, Business Engagement and Environment Capital</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Relevant internal and external stakeholders</p> | <p>Stuart Mounfield Senior Engineer Tel: 01733 453598 stuart.mounfield@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |

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| <p>All Saints Junior School - Extension of Age Range - KEY/03FEB/12 To commission a new all through Voluntary Aided Primary School to enable the extension of the age range of All Saints Junior School.</p> | <p>July 2012</p> | <p>Cabinet Member for Education, Skills and University</p> | <p>Creating Opportunities and Tackling Inequalities</p> | <p>Relevant internal stakeholders as appropriate.</p> | <p>Alison Chambers Principal Assets Officer (Schools) Tel: 01733 863975 alison.chambers@peterborough.gov.uk</p> | <p>A public report will be available from the Governance team one week before the decision is taken.</p> |
| <p>Award of Contract - Bus Shelter Provision and Maintenance - KEY/01APR/12 Award of contract for the provision, installation, cleaning and maintenance of Bus Shelters.</p> | <p>July 2012</p> | <p>Cabinet Member for Housing, Neighbourhoods and Planning</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Darren Deadman Travel Information and Monitoring Officer Tel: 01733 317464 darren.deadman@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Award of Transport Contracts - KEY/02APR/12 To award contracts for Mainstream, Special Educational Needs and Children in Social Care.</p> | <p>July 2012</p> | <p>Cabinet Member for Education, Skills and University</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal departments as appropriate.</p> | <p>Mark Speed Transport Planning Team Manager Tel: 317471 mark.speed@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |

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| <p>Moy's End Stand Demolition and Reconstruction - KEY/03APR/12 Award of Contract for the Demolition of the Moy's End Stand and Reconstruction</p> | <p>July 2012</p> | <p>Cabinet Member for Education, Skills and University, Cabinet Member for Resources</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and External Stakeholders as appropriate.</p> | <p>Richard Hodgson Head of Strategic Projects Tel: 01733 384535 richard.hodgson@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Clare Lodge – additional four lounge areas - KEY/04APR/12 To award the contract for the construction of four new lounge areas.</p> | <p>July 2012</p> | <p>Cabinet Member for Children's Services</p> | <p>Creating Opportunities and Tackling Inequalities</p> | <p>Relevant internal stakeholders as appropriate</p> | <p>Sharon Bishop Assets Officer Tel: 01733 863997 sharon.bishop@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Energy Services Company - KEY/05APR/12 To consider potential future developments of energy related products</p> | <p>July 2012</p> | <p>Cabinet</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders.</p> | <p>John Harrison Executive Director-Strategic Resources Tel: 01733 452398 john.harrison@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |

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| <p>Organic and Food Waste Treatment Services Contract - KEY/01MAY/12 To Award a contract for Organic and Food Waste Treatment Services.</p> | <p>July 2012</p> | <p>Deputy Leader and Cabinet Member for Culture, Recreation and Strategic Commissioning</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Amy Nebel Recycling Contracts Officer Tel: 01733 864727 amy.nebel@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team on week before the decision is taken.</p> |
| <p>Bridge Street Public Realm Improvements - KEY/02MAY/12 To award the contract to undertake engineering works as part of the Bridge Street Public Realm Improvement works.</p> | <p>July 2012</p> | <p>Leader of the Council and Cabinet Member for Growth, Strategic Planning, Economic Development, Business Engagement and Environment Capital</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Andrew Edwards Head of Peterborough Delivery Partnership Tel: 01733 452303 andrew.edwards@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Energy from Waste Facility and associated works and services - KEY/01 JUN/12 To appoint a preferred bidder and award the contract for an energy from waste facility along with associated works and services.</p> | <p>July 2012</p> | <p>Deputy leader and Cabinet Member for Culture, Recreation and Strategic Commissioning; and Cabinet Member for Resources.</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Margaret Welton Principal Lawyer (Special Projects/Waste 2020) Tel: 01733 452226 margaret.welton@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |

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| <p>Street Lighting Efficiency Programme (2012/13 and 2013/14) and Street Lighting Column Replacement Programme (2012/13) - KEY/02JUN/12 To approve the award of a contract for Street Lighting Works.</p> | <p>July 2012</p> | <p>Cabinet Member for Housing, Neighbourhoods and Planning</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Sally Savage Senior Project Support Worker sally.savage@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Opportunity Peterborough Business Plan - KEY/03JUN/12 To approve the Business Plan for Opportunity Peterborough for 2012/13.</p> | <p>July 2012</p> | <p>Cabinet</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Relevant internal and external stakeholders.</p> | <p>Neil Darwin Director of Economic Development neil.darwin@opportunitypeterborough.co.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Roundabout Junction 5 and Boongate West Widening Scheme - Contract Award - KEY/04JUN/12 To approve the award of a contract for construction of the Roundabout Junction 5 and Boongate West Widening Scheme to the successful Midlands Highways Alliance (MHA) contractor (tbc).</p> | <p>July 2012</p> | <p>Cabinet Member for Housing, Neighbourhoods and Planning</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Consultation on scheme was carried out in 2010 /11 Financial Year and budget allocated in the Medium Term Financial Strategy for implementation in the 2012/13 Financial Year.</p> | <p>Stuart Mounfield Senior Engineer Tel: 01733 453598 stuart.mounfield@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |

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| <p>Rolling Select List - Independent Fostering Agencies - KEY/01 JUL/12 To approve the list for independent fostering agencies.</p> | <p>July 2012</p> | <p>Cabinet Member for Children's Services</p> | <p>Creating Opportunities and Tackling Inequalities</p> | <p>Internal and external stakeholders as appropriate.</p> | <p>Wendi Ogle-Welbourn Assistant Director for Strategy, Commissioning and Prevention wendi.ogle-welbourn@peterborough.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is taken.</p> |
| <p>Consultation on the Review of the Older Peoples Accommodation Strategy and Options for the future of Care Homes in Peterborough - KEY/02 JUL/12 To approve the consultation on the outcomes of the review of the Older Peoples Accommodation Strategy and options for the way forward.</p> | <p>July 2012</p> | <p>Cabinet</p> | <p>Scrutiny Commission for Health Issues</p> | <p>Public consultation with all relevant parties.</p> | <p>Terry Rich Executive Director Adult Social Services (interim) Tel: 01733 758444 terry.rich@peterborough.gov.uk</p> | <p>Public report will be available from the Governance Team one week before the decision is made.</p> |

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|---|------------------|--|---|--|---|--|
| <p>Delivery of the Council's Capital Receipt Programme through the Sale of Dickens Street Car Park - KEY/03JUL/11 To authorise the Chief Executive, in consultation with the Solicitor to the Council, Executive Director – Strategic Resources, the Corporate Property Officer and the Cabinet Member Resources, to negotiate and conclude the sale of Dickens Street Car Park.</p> | <p>July 2012</p> | <p>Cabinet Member for Resources</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Consultation will take place with the Cabinet Member, Ward councillors, relevant internal departments & external stakeholders as appropriate.</p> | <p>Richard Hodgson Head of Strategic Projects Tel: 01733 384535 richard.hodgson@peterborou.gh.gov.uk</p> | <p>A public report will be available from the Governance Team one week before the decision is made.</p> |
| <p>Delivery Strategy for South Bank & Surrounding Areas - KEY/04JUL/12 To agree a refreshed delivery strategy for the regeneration of South Bank and surrounding areas.</p> | <p>July 2012</p> | <p>Cabinet</p> | <p>Sustainable Growth and Environment Capital</p> | <p>Internal and external stakeholders as appropriate</p> | <p>Andrew Edwards Head of Peterborough Delivery Partnership Tel: 01733 452303 andrew.edwards@peterborou.gh.gov.uk</p> | <p>A public report will be available from the governance team one week before the decision is taken.</p> |

AUGUST

There are currently no Key Decisions scheduled for August.

| SEPTEMBER | | | | | | |
|---|-------------------------|-----------------------|--|---|---|---|
| KEY DECISION REQUIRED | DATE OF DECISION | DECISION MAKER | RELEVANT SCRUTINY COMMITTEE | CONSULTATION | CONTACT DETAILS / REPORT AUTHORS | REPORTS |
| Community Infrastructure Levy (CIL) – Preliminary Draft Charging Schedule (PDCS) - KEY/01SEP/12 To approve the draft CIL for public consultation. | September 2012 | Cabinet | Sustainable Growth and Environment Capital | Six week public consultation including Planning and Environmental Protection Committee. | Richard Kay Policy and Strategy Manager richard.kay@peterborough.gov.uk | A public report will be available from the Governance Team one week before the decision is taken. |

| OCTOBER |
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| There are currently no Key Decisions scheduled for October. |

CHIEF EXECUTIVE'S DEPARTMENT Town Hall, Bridge Street, Peterborough, PE1 1HG

Communications
Strategic Growth and Development Services
Legal and Governance Services
Policy and Research
Economic and Community Regeneration
HR Business Relations, Training & Development, Occupational Health & Reward & Policy

STRATEGIC RESOURCES DEPARTMENT Director's Office at Town Hall, Bridge Street, Peterborough, PE1 1HG

Finance
Internal Audit
Information Communications Technology (ICT)
Business Transformation
Strategic Improvement
Strategic Property
Waste
Customer Services
Business Support
Shared Transactional Services
Cultural Trust Client

CHILDRENS' SERVICES DEPARTMENT Bayard Place, Broadway, PE1 1FB

Safeguarding, Family & Communities
Education & Resources
Strategic Commissioning & Prevention

OPERATIONS DEPARTMENT Director's Office at Town Hall, Bridge Street, Peterborough, PE1 1HG

Planning Transport & Engineering (Development Management, Construction & Compliance, Infrastructure Planning & Delivery, Network Management, Passenger Transport)
Commercial Operations (Strategic Parking and Commercial CCTV, City Centre, Markets & Commercial Trading, Tourism)
Neighbourhoods (Strategic Regulatory Services, Safer Peterborough, Strategic Housing, Cohesion, Social Inclusion, Neighbourhood Management)
Operations Business Support (Finance)

ADULT SOCIAL CARE DEPARTMENT Town Hall, Bridge Street, Peterborough, PE1 1FA

Care Services Delivery
Strategic Commissioning
Performance, Quality and Information

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SCRUTINY COMMISSION FOR HEALTH ISSUES
WORK PROGRAMME 2012/13

| Meeting Date | Item | Progress |
|---|---|--|
| <p>21 June 2012 <i>Draft report 6 June</i> <i>Final report 12 June</i></p> | <p>Equality Delivery System (EDS) To scrutinise and approve the EDS rating templates of NHSP and PSHFT and make any recommendations. Contact Officer: Joan Tiplady, Senior Manager</p> | <p>A progress report to come back to the Commission in September.</p> |
| | <p>Redesign of mental health services across Cambridgeshire and Peterborough: Overview and Scrutiny Committee action to monitor the implementation of the proposals To agree arrangements for Overview and Scrutiny follow up of the implementation of the redesign of mental health services in Cambridgeshire and Peterborough. Contact Officer: Paulina Ford</p> | <p>Recommendation made to agree to the formation of a working group to monitor the implementation of the redesign of mental health services.</p> |
| | <p>Adult Social Care – Update Report To receive a progress report on the recent transfer of Adult Social Care from the Primary Care Trust to Peterborough City Council Contact Officer: Terry Rich, Director of Adult Social Services</p> | |
| | <p>Review of 2011/12 and Future Work Programme 2012/13 To review the work undertaken during 2011/12 and to consider the future work programme of the Committee. Contact Officer: Paulina Ford</p> | <p>Items to be programmed into the work programme.</p> |
| | | |

| Meeting Date | Item | Progress |
|--|--|----------|
| <p>17 July 2012 <i>Draft report 29 June</i> <i>Final report 6 July</i></p> | <p>Quarterly Performance Report on Adult Social Care Services in Peterborough To scrutinise the performance on adult social care services and make any appropriate recommendations. Contact Officer: Tina Hornsby</p> <p>Older Peoples Accommodation Strategy To scrutinise the Older Peoples Accommodation Strategy and make any recommendations. Contact Officer: Terry Rich</p> | |
| <p>20 September 2012 <i>Draft report 4 Sept</i> <i>Final report 11 Sept</i></p> | <p>Peterborough and Stamford Hospitals NHS Foundation Trust</p> <p>Contact Officer: Interim CEO, Dr Peter Reading</p> <p>Equality Delivery System – Progress Report</p> <p>Contact Officer: Joan Tiplady, Senior Manager</p> <p>Clinical Commissioning Intentions and Priorities</p> <p>Contact Officer:</p> | |
| <p>13 November 2012 <i>Draft report 26 Oct</i> <i>Final report 2 Nov</i></p> | <p>Quarterly Performance Report on Adult Social Care Services in Peterborough To scrutinise the performance on adult social care services and make any appropriate recommendations. Contact Officer: Tina Hornsby, Assistant Director Quality Information and Performance</p> | |

| Meeting Date | Item | Progress |
|--|--|----------|
| | Public Health Transformation | |
| | Contact Officer: Andy Liggins | |
| | Peterborough and Stamford Hospitals NHS Foundation Trust – Quality Account Progress Report | |
| | Chris Wilkinson, Director of Care Quality and Chief Nurse | |
| | | |
| | Dementia Strategy | |
| | Contact Officer: Terry Rich, Director of Adult Social Services | |
| | Financial Recovery Update - Peterborough and Stamford Hospitals NHS Foundation Trust | |
| | Contact Officers: Chris Preston / Louise Barnett | |
| | | |
| 9 or 21 January 2013 (Joint Meeting of the Scrutiny Committees and Commissions) | Budget 2013/14 and Medium Term Financial Plan To scrutinise the Executive's proposals for the Budget 2012/13 and Medium Term Financial Plan. Contact Officer: John Harrison/Steven Pilsworth | |
| | | |
| 12 March 2013 Draft report 22 Feb Final report 1 March | Quarterly Performance Report on Adult Social Care Services in Peterborough To scrutinise the performance on adult social care services and make any appropriate recommendations. | |

| Meeting Date | Item | Progress |
|--------------|---|----------|
| | <p>Contact Officer: Tina Hornsby, Assistant Director Quality Information and Performance</p> | |

Possible Items for Scrutiny: 2012/13

Cambridgeshire Community Services NHS Trust

- Five year plan and priorities

Adult Social Care

- Local Account – September
- Transformation Programme for Adult Social Care and Business Plan
- Quality Framework
- Quality Care Commission

Peterborough and Stamford Hospitals NHS Foundation Trust

- Stamford Hospital, September, Jane Pigg

Portfolio Progress Report from Cabinet Member for Adult Social Care