

Swindon Borough Council

Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee

Tuesday, 21 June 2016

Committee Room 6, Civic Offices

At 6.00 p.m.

Conservative Councillors

Alan Bishop

Claire Ellis

Mary Friend

Caryl Sydney-Smith

Steve Weisinger

Labour Councillors

Steve Allsopp

Steph Exell

Julie Wright

Robert Wright

Co-opted Representatives

Mark Edwards (Healthwatch)

To be confirmed (Equalities Advisory Forum)

Committee Officer: Rita Glen Gallo, 01793 463611, rglen-gallo@swindon.gov.uk

Swindon Borough Council can be contacted at the Civic Offices, Euclid Street, Swindon, SN1 2JH (Telephone 01793 445500)

Access Arrangements - The venue is wheelchair accessible and an infrared receiver hearing system is provided. If you have any special requirements to enable you to attend the meeting or would like to receive any of the pages contained in this agenda in a larger print size, please contact the Committee Officer as soon as possible prior to the date of the meeting.

AGENDA

1. Apologies for Absence

2. Appointment of Vice Chair

3. Declarations of Interest

Members are reminded that at the start of the meeting, they should declare any known interests in any matter to be considered and also during the meeting if it becomes apparent that they have an interest in the matters being discussed.

4. Minutes (Pages 3 - 8)

To receive the minutes of the Adults' Health, Social Care and Housing Overview and Scrutiny meeting held on 24th March 2016.

5. Public Question Time

See explanatory note below. Please phone the Committee Officer whose name and number appears at the top of this agenda if you need further guidance.

6. **Appointment of Co-optees** (Pages 9 - 10)
7. **Performance for Adults Health, Social Care and Housing** (Pages 11 - 28)
8. **NHS Swindon Clinical Commissioning Group** (Pages 29 - 36)
9. **Great Western Hospitals NHS Foundation Trust Update** (Pages 37 - 46)
10. **Avon & Wiltshire Partnership NHS Trust** (Pages 47 - 50)
11. **Work Programme 2016-17** (Pages 51 - 74)

Date of Despatch: 13 June 2016

Public Question Time - Swindon Borough Council remains committed to increasing its accountability to the public and to promoting active citizenship. 15 minutes will be allowed at the start of all Council meetings for questions to the Chair from the public about the work of the Committee (except for confidential matters, and matters relating to planning and licensing applications). We will give priority to those who submit questions in writing at least two days before the meeting. Questions must be relevant, clear, and concise. You may not use Public Question Time as an opportunity to make speeches or statements.

Questions in writing should be sent to the Committee Officer whose contact details appear on the agenda above, or to the Director of Law and Democratic Services. We will publish it, along with the answer, alongside the Minutes. The process associated with asking a public question is set out in the "Public Question Time at Council Meetings Protocol and Guidance" available from the Committee Officer named above or on the Council's Website at:

(<http://ww5.swindon.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13338&path=0>).

Terms of Reference:

To fulfil all the functions of an overview and scrutiny committee as they relate to:

- The review, scrutiny, and development of policy recommendations;
- The management of performance;
- The monitoring of progress towards delivering relevant strategies and corporate priorities; and
- The formulation of advice for the Cabinet, Council and other partners and stakeholders.

To have specific responsibility for (but not limited to) the scrutiny of:

- Adult Social Care;
- Community and Neighbourhoods; and
- Housing.

In addition, as these relate to Adults and Adult Social Care:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators;
- Health, health commissioning and service delivery;
- Public Health, Health promotion and the work of the Health and Wellbeing Board; and
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners.

**ADULT'S HEALTH, SOCIAL CARE AND HOUSING OVERVIEW AND SCRUTINY
COMMITTEE**

THURSDAY, 24 MARCH 2016

PRESENT:- Councillors Maureen Penny (Chair), Alan Bishop, Claire Ellis, Steph Exell, John Haines, Fay Howard, Derique Montaut, Caryl Sydney-Smith, Keith Williams, Julie Wright and Robert Wright and Rosemarie Phillips (EAF).

An apology for absence was received from Councillor Mary Friend.

Also Present: Councillor Brian Mattock, Deputy Leader and Cabinet Member for Adult Health and Social Care, Sue Wald (Interim Director, Adult Social Care), Gill May (Executive Nurse at NHS Swindon Clinical Commissioning Group), Kevin McNamara (Director of Strategy, Great Western Hospital), Heather Mitchell (SEQOL), Michelle Howard (SEQOL) and Cherry Jones (Director of Public Health).

51. Declarations of Interest

The Chair reminded Members of the need to declare any known interests in any matters to be considered at the meeting.

Councillor Fay Howard made a personal and non-prejudicial declaration in interest of the Committee's consideration of health matters relating to Great Western Hospital as she was an employee at the hospital.

52. Public Question Time

No public questions were asked or submitted for this meeting.

53. Minutes

Resolved – (1) That the minutes of the meeting held on 11th February 2016 be confirmed and signed as a correct record.

(2) That further to Minute 46, it be noted that the Chair is still to meet Dr Peter Crouch (Clinical Chair of Swindon Clinical Commissioning Group) reference communication to be submitted to NHS Swindon on the amount of funding being delegated to Primary Care and seeking information on how this was intended to be allocated to services.

54. Performance for Adults Health, Social Care and Housing

The Interim Director, Adult Social Services, submitted a report updating the Committee on key issues relating to commissioning and performance. Mrs Sue Wald, Interim Director, Adult Social Care, introduced the report, commenting, in particular, on issues relating to delayed transfer of care, including Avon and Wiltshire Partnership Trust NHS data, and the significant reduction in delayed transfer of care figures as a result of partnership working with SEQOL and the Great Western Hospital Trust.

Mrs Sue Wald and Mr Kevin McNamara, Director of Strategy, Great Western Hospital, responded to the Committee members' questions and comments in respect of:

- The explanation given by officers regarding delayed discharge of care data, particularly relating to the reduction in demand in February following a busy January.
- The structure of the report with some items outstanding at "Red", some in "Significant improvers" but there were no items were in the "To watch" category.
- The financial implications due to budget pressures as reflected in 5.1 of the report.
- How Local Indicator NI 132 (Waiting times for assessment from contact to end of assessment within 28 days for New Clients) data was calculated.
- Why Local Indication NI133 (Waiting times for Services from end of assessment to provision of all services within 28 days for new clients) was below the target of 89%.
- Officers presenting data regarding delayed discharge of care data in all future performance reports.

Resolved: (1) That the report be noted.

(2) That the Interim Director, Adult Social Services, be requested to include information regarding delayed discharge of care in future performance reports submitted to this Committee.

55.

SEQOL

The Chief Executive, SEQOL, submitted a report updating the Committee on the performance and key issues relating to the services they commission. Mrs Heather Mitchell, Chief Executive, SEQOL, presented the report and referred to SEQOL's challenges, particularly due to the continued increase in demand and support being provided to Great Western Hospital and social care providers.

Mrs Mitchell made specific reference to:

- The review of policy and processes to reduce the increase in the prevalence of pressure ulcers.
- The End of Life Strategy where the aim was to enhance the quality of life of patients and referred to funding secured for end of life care in Swindon.
- SEQOL presentation of a business case for the Building Better Opportunities Project where SEQOL were leading on the Learning Disabilities Programme within the project.

In response to a specific query regarding the End of Life Strategy, members noted that whilst the strategy came into effect in 2008, it still ensured patients were able to fulfil their choices and access the end of life care they wanted. Ms Gill May, Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG) explained that a report reviewing end of life support would be submitted at a future meeting of the Health and Wellbeing Board.

Resolved: (1) That the report be noted.

(2) That the Chief Executive, SEQOL, be requested to submit a report regarding end of life care at a future meeting of this Committee.

56.**NHS Swindon Clinical Commissioning Group**

The Head of Communications and Engagement, NHS Swindon, Clinical Commissioning Group submitted a report updating the Committee on the performance and key issues relating to the service particularly to the one year Operational Plan and Sustainable operation Plan, the MUSE development and national funding allocations for 2016 to 2021.

Ms Gill May, Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG) introduced the report explaining that it was a strategic report reflecting the direction of travel for the CCG. Ms May referred to the One Year Operational Plan and Sustainable Transformation Plan as being footprints for providers and that there might be opportunities for them to work more cohesively. She explained that providers would have a five year plan in place by end of June and this would reflect the model for future provision. Ms May advised that current commissioning contracts were coming to an end and a Procurement Board had been set up to review future contracts. Members noted that Primary Care Services were under pressure due to lack of funding.

Ms Gill May responded to questions and comments from the Committee regarding the following:

- The increase in demand for locum doctors.
- The need to recruit general practitioners to Swindon and the work being undertaken with NHS England to ensure continued service within doctors' practices.
- Attendance at the "Breaking Soil" event.
- The importance of ensuring that new quangos were not created and the need to reorganise present provision rather than having a need to create new commissioner and provider services.
- The need to reduce "red tape" and bureaucracy between commissioners and providers to ensure the community are supported both within and without hospitals.
- Patients' utilisation of the Swindon Mental Health Crisis Concordat and whether cases were solely drug and alcohol related or encompassed all mental health issues.
- The need to improve engagement with staff on the MUSE development.

Resolved – (1) That the report be noted.

(2) That the Committee support NHS Swindon Clinical Commissioning Group in their bid to procure further funding from NHS England.

(3) That the Executive Nurse at NHS Swindon Clinical Commissioning Group (CCG) be requested to submit a flow chart / schematic visually outlining a model of an "Accountable Care Organisation" at the next meeting of this Committee.

(4) That the Interim Director, Adult Social Services, be requested to circulate information regarding the number of repeat mental health patients within the Swindon Mental Health Crisis Concordat programme.

57.**Great Western Hospitals NHS Foundation Trust Update**

The Committee received a report by the Chief Executive of the Great Western Hospital (GWH) NHS Foundation Trust on key issues and developments at the Great Western Hospital relating to the Care Quality Commission improvement journey, the Emergency Department and the development of new roles to support

patients.

Mr Kevin McNamara, Director of Strategy, Great Western Hospital (GWH), presented the report and highlighted matters of significance, particularly the need to review processes within the Emergency Department to ensure patients attending the Accident and Emergency (A&E) Department were seen within agreed timescales. He referred to weekly management meetings to address actions arising following the Care Quality Commission inspection, particularly relating to the A&E Department. Mr McNamara commented on the junior doctor's strike and to contingency plans being set up to maintain service provision. He further referred to the Trust's financial position and members noted that the deficit was less than predicted.

Mr McNamara commented on the Mutually Agreed Resignation Scheme (MARS) programme and explained that this did not affect clinical staff. He advised that there would be no redundancies, but staff were given the opportunity to leave the Trust voluntarily. Members noted that the Sepsis Team were shortlisted for the Clinical Leadership Award. This was a national award under the aegis of the British Medical Journal.

Following the presentation of his report, members enquired on the effect that a PFI contract had had on Great Western Hospital's financial position. Mr McNamara explained that termination of PFI contracts was a national issue. Councillor Brian Mattock, Deputy Leader and Cabinet Member for Adult Health and Social Care, explained that the Leader, Councillor David Renard, together with the Leader of Wiltshire Council had raised the issues of PFI contracts with the Local Government Association Board. In response to a query regarding future radiotherapy services, Mr McNamara confirmed that Oxford Hospital Trust would be funding this service and it would have no financial impact on the Great Western Hospital PFI.

Resolved: That the report be noted.

58. Avon & Wiltshire Partnership NHS Trust

The Committee received a report by the Clinical Director, Avon and Wiltshire NHS Partnership Trust (AWP) outlining challenges and achievements for the organisation.

Resolved: (1) That the report be noted.

(2) That, in the absence of a representative from the Avon and Wiltshire Partnership NHS Trust, members of the Committee be requested to submit any questions to the Overview and Scrutiny Officer for circulation to the Trust.

59. Dementia Task Group

The Committee received a report and recommendations from its Dementia Task Group, established to review the partnership arrangements and whether the health journey was meeting the needs of patients. Councillor Bob Wright, the Chair of the Task Group, introduced the report, explaining the rationale for the review and expanding on the structure and methodology of the Task Group's investigation. It was noted that interviews had been undertaken by the Task Group with various agencies, including Avon and Wiltshire Partnership and SEQOL.

Resolved: (1) That the Committee welcomes this report and acknowledges

the hard work of its Task Group in undertaking this review to inform the development of future change and improvement for dementia patients.

(2) That due to the range of the subject matter and the limited opportunity to influences change and improvements, the work of the Dementia Task Group continues into 2016/17 Municipal Year.

60. Transitions Task Group

The Committee received the Final Report and recommendations of its Transitions Task Group, established to look at (a) the transition from young person to adult care, (b) the cost of placements and (c) how costs could be reduced. Councillor Caryl Sydney-Smith introduced the report, advising the Committee of the aims, objectives and methodology of the review, which had included a series of site visits and meetings with commissioners and young people. Councillor Sydney-Smith also provided some background to the various recommendations set out in the report.

Resolved: (1) That support living provision (or similar) be made available for young people with learning disabilities to enable them to learn how to live independently where possible.

(2) That Commissioner Voluntary and Third Sector be requested to take 'parent to parent discussion' as a proposal to the Parents and Carers Advisory Group to discuss how this might best be facilitated.

(3) That the Council work in partnership with special schools and colleges, with employers, and with the voluntary sector to improve work experience and supported internships for young people with learning disabilities.

(4) That the Council engage with their partners in the voluntary sector and with leisure providers to improve opportunities for young people with learning disabilities to engage in sport, leisure, music and art.

(5) That all officers and Members involved in the task group review be thanked for their continued hard work.

61. Work Programme 2015_16

The Director of Law and Democratic Services submitted a report on the Committee's work programme for the current Municipal year, detailing the activities that the Committee had undertaken during the course of the year.

Resolved – (1) That the report be noted.

(2) That contributions from Councillors and stakeholders for consideration for inclusion in the Committee's Work Programme for the Municipal Year, 2016/17, be welcomed.

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Appointment of Co-optees

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

Author:	Director of Law & Democratic Services
Wards:	All Wards
Locality Affected:	All Locality Areas
Parishes Affected:	All Parish Area

1. Purpose and Reasons

- The purpose of the report is to confirm the appointment of co-optees to the Adults' Health, Adult's Care and Housing Overview and Scrutiny Committee for the Municipal year 2016/17.
- The Adults' Health, Adult's Care and Housing Overview and Scrutiny Committee is permitted by the Council's Constitution to appoint non-voting co-opted members.

2. Recommendations

The Committee is recommended to:

- 2.1 To agree the number of co-optees to be appointed to the Committee.
- 2.2 To confirm the appointment of the agreed co-opted representatives, to include:-
 - Mark Edwards (Swindon Healthwatch)
 - Representative from the Equalities Advisory Forum.

3. Detail

- 3.1 The Council's Constitution states that each Overview and Scrutiny Committee, Sub-Committees or Task Group shall be entitled to appoint a number of people as non-voting co-optees.
- 3.2 In previous years, the Adult's Health, Social Care and Housing Overview and Scrutiny has appointed two co-optees.
- 3.3 The Committee is asked to determine whether any additional co-opted representatives should be sought to support its work programme for the year.

4. Alternative Options

- 4.1 The Committee may choose only to appoint co-optees required under the Constitution and to appoint other co-optees to support their work programme on a meeting-by-meeting basis.

Further information on the subject of this report can be obtained from Rita Glen-Gallo, 01793 463411, rglen-gallo@swindon.gov.uk.

Appointment of Co-optees

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

5.1 Co-opted representatives are entitled to claim travel and meal allowances in order to attend Council meetings, the costs of which are met from within the Allowance budget. There are no procurement implications arising from the contents of his report.

Legal and Human Rights Implications

5.2 Section 21 of the Local Government Act requires every local authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.

Diversity Impact Assessment

5.4 No Diversity Impact Assessment is required at this stage. Any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage

6. Consultees

6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None.

8. Appendices

8.1 None.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

Author: Director of Adult Social Services

Wards: All

Locality Affected: All

Parishes Affected: All

1. Purpose and Reasons

- 1.1 This report provides the Adults Health, Adults Care & Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Adult Social Care commissioning and performance.
- 1.2 A key purpose of the Adults Health, Adults Care & Housing Overview and Scrutiny Committee to hold Providers of Health Services to account.
- 1.3 Any provider of Health Services in Swindon is required to provide information on the planning and provision of health services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

3. Detail

- 3.1 What are the challenges that your organisation is facing?

Top Priorities	Process	Outcomes
Delayed Transfers of Care (DTOC)	This indicator is an average of the monthly snapshot figure per 100k population. Swindon's final year out turn is 14.8 per 100k population compared with a South West average of 17.4 per 100k population, the national average is 12.3 per 100k	Locally Swindon has increased provision of domiciliary care by 1,000 per week demonstrating that providers have increased capacity. A DTOC programme board has been

Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number, 01793 465713 swald@swindon.gov.uk.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

	<p>population.</p> <p>Monitoring has clearly shown that delays early on in the year has had an impact on our overall result and over the last 6 months significant process changes and additional resources have made the process more robust and is reducing delays for those being discharged making a positive direction of travel upwards.</p>	<p>established with CCG, SEQOL and GWH and delays have reduced significantly since January 2016.</p> <p>34 beds are commissioned to support hospital discharge through Fessey House and beds in nursing homes.</p>
ASCOF 1 C part 1 % of Clients receiving Self Directed Support	<p>Personalisation is a key national driver, enabling people to have choice and control of their support services. Our year end out turn is 82.6% (equating to 1184 people) which is an increase of 9.9% on our previous year's result of 72.09% equating to 1077 people. This is a good improvement, however more work needs to be done as the national target is 100% of eligible community based clients to receive a personal budget.</p>	<p>Work has continued throughout the year by commissioners with additional training being given to Avon & Wiltshire Mental Health Partnership (AWP) practitioners to improve access to self directed support for people with mental health needs. Training in using an online tool has commenced with SEQOL which will further improve performance over the coming months</p>
Growth in need for Domiciliary Care	<p>We have seen a growth in the need for domiciliary care hours to support older people in their own home, a rise of nearly 15%, from an average of 7,000 hours domiciliary care support per week in 2014/15 to 8,043 per week</p>	<p>Commissioners are working to bring new providers into Swindon and with existing providers to support the increasing need and there will be a</p>

Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number, 01793 465713 swald@swindon.gov.uk.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

	during 2015/16. The growth has been to support the flow of adults being discharged from the hospital to reduce delays.	forthcoming tender for domiciliary care.
Percentage of people with a learning disability in employment	The end of year data shows that the percentage of people with a learning disability reduced from 4.2% to 3.65%.	We have appointed 5 Transition workers to start planning with young people and their families. We continue to commission places from United Education Trust to prepare young people for employment. A corporate programme on Transitions will start in June 2016 to improve transition arrangements and increase numbers into employment and training.

3.2 What have you done well?

Top Five Achievements	Steps taken	Next steps
Local Indicator D40 % of Clients who have received a service during that received an annual review of need.	Provisional year end result is 72% (equating to 3992 people receiving an annual review) just above target for the year of 71%. This is a 4.2% increase in the number of reviews completed in 2014/15 where 3829 were completed.	Timely annual reviews are key in ensuring clients receive the most appropriate support for their needs and ensure people have the opportunity to receive their care through a personal budget.

Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number, 01793 465713 swald@swindon.gov.uk.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

ASCOF Indicator 2A(2) - Permanent admissions to care homes: people aged 65+	Total number of admissions for older adults for the year was 220 people increasing from 218 in the previous year. The split across residential and nursing has remained static with nursing admissions at 98 people (same as 2014/15) and residential at 122 (up from 120 in 2014/15). This result equates to a rate of 682.48 per 100k population, well within the target for the year of 744.52.	Commissioners continue close joint working with key providers and health, reducing inappropriate admissions to care. We are seeing a higher turnover of placements rather than additional beds being purchased.
Safeguarding Single Point of Contact and new agreements.	<p>The new Single Point of contact and in-house Safeguarding team has been in place since 1st April 2015, this was to support the new Care Act legislation implementation. During the year new practices have been developed and processes streamlined. This has also supported the national strategy in 'making safeguarding personal'.</p> <p>We received 1119 alerts during the year compared with 717 in the previous year.</p>	Whilst the number of concerns raised has increased, the number of cases requiring an enquiry has not significantly increased. The Local Safeguarding Adults Board (LSAB) has investigated the figures and will be giving provider based information showing levels of referrals and levels of enquiries to ensure that issues of quality are dealt with by providers rather than through safeguarding. We will continue to

Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number, 01793 465713 swald@swindon.gov.uk.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

		monitor this.
Service user feedback through annual survey	A number of indicators relating to service users feeling safer through the services they receive is (91%), having access to information and advice is (75%), experiencing good quality of life: (score 19.3)	A number of indicators referenced in the performance report in bold, measure the views of service users. The majority of indicators show improvement on the previous year.

4. Alternative Options

4.1 None

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

5.1 The 2015/16 final outturn position for Adults Commissioning budgets was a net overspend of £669k (1% of total budget). In total £6.6m of savings were made in adult social care with a total budget of £61.125m. The pressures within Adult Social Care were mainly around cost of care packages for Older People which overspent by £2,021k. Increased demand was mainly due to additional care home and care home support services commissioned to minimise the number of delayed discharges from hospital. The savings in Learning Disability and other adult care packages was £829k, voluntary sector contracts was £257k and other savings of £266k reduced net pressure in Adults down to £669k.

5.2 Legal and Human Rights Implications

5.3 None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.4 None.

Diversity Impact Assessment

5.5 None.

Further information on the subject of this report can be obtained from Sue Wald, Direct Dial Telephone Number, 01793 465713 swald@swindon.gov.uk.

Performance for Adults Health, Social Care and Housing

Adults Health, Adults Care & Housing Overview and Scrutiny

Committee

Date: 21st June 2016

Risk Management

5.6 None.

6. Consultees

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None.

8. Appendices

8.1 Appendix 1 - Performance report

Adults Social Care and Health Performance Report

2015/16

March 2016

4th Quarter Update v2

Headline Messages from the Data 15/16 Qtr 4

Front Door Activity
Preventative
Personalisation
Admissions

A total of 14,240 contacts have been received in the year where 51.2% progressed to assessment. This is an increase on 2014/15 where 14,068 contacts were received where 48.7% progressed to assessment which means that although more contacts have been received, more are being dealt with at the point of contact.

5332 new clients received an assessment of need during the year, of those, 49.73% progressed to a service. This is slightly down on the same period last year where 52.36% of contacts received a service.

During the year 292 adults received an episode of domiciliary reablement & 104 people had an episode of residential reablement. ASCOF 2B (1) reflects % of older people who were discharged from hospital with reablement & were still at home 91 days post (only measured between October- December). Our provisional result is 85%, a drop from 14/15 result of 93.2% but our number of older people who were discharged with reablement has increased significantly. 14/15 benchmarking national average was 82.1%

The in-house Safeguarding team established a single point of contact, which is considered to be effective and welcomed by partner agencies. During the year, 1119 concerns were received (860 relate to individuals) compared with 717 in the previous year. Many of those were quality related as the number of enquiries was 415, a 5% increase from 2015.

Our year end provisional out turn for ASCOF 1C adults receiving a personal budget or direct payment is 82.6% (equates to 1184 people) an increase from last years result of 72.1% but below the national target of 100% of clients living in the community. Broken down across the groups, Seqol achieved 82.1%, Learning Disability 90% and Mental Health have 51% of clients. The 14/15 national average was 82.6%.

Receiving an annual review of need is a key part of the personalisation process & ensuring only current needs are being met. Our provisional result for local KPI D40 Clients who have received a service who received a review of need is 72% above target for the year of 71%, slightly down on previous year result of 72.6%. Broken down, Mental Health clients received 85.2%, Learning Disability 52.7% and Seqol 71.8%.

During the year there has been a total of 12 admissions for younger adults aged 18-64 to residential & nursing care, equating to 8.89 per 100k population, one person above the target for the year. Broken down there were 5 Learning Disability, 4 Mental Health and 3 Physical Disability placements. This is an improved position on last year's result of 11.14 equating to 15 people. For the age band 65+ we made a total of 220 admissions, 184 older people, 34 older people with mental health support needs and 2 older people with learning disabilities. We achieved 682.48 per 100k pop well within the annual target of 744.52 and 2 admissions higher than the previous year.

Improved pathways supporting appropriate access. MCMS portal linked to SBC website offering information and advice and universal services

Local monitoring is in place to ensure waiting times for assessments and safeguarding alerts remain within an acceptable level.

Prevention and early intervention are key to reducing crisis situations and maintaining stability

Monthly monitoring of both providers is in place to increase our numbers of personal budgets

Although we have achieved our target there are areas where further progress is required.

Stronger verifications processes mean better control and oversight of people entering placements appropriately.

Front Door Activity

Performance Assessment

Numbers of Contacts

The total number of contacts received into Adult Social Care during 2015/16 was 14,240, up from 14,068 in the previous year. The table below shows the sources of those contacts during the year and the outcome following:

	Outcome	Source of Contact				Not Recorded	Grand Total
		Community/ Other Route	Discharge From Hospital	From Hospital	Entry Transition		
All Contacts	Info & Advice	2625	272	3	6	217	3123
	NFA	2754	500	3		182	3439
	Not Recorded	210	166		3	9	388
	Progressed	5534	1398	74	3	281	7290
	Grand Total	11123	2336	80	12	689	14240

The Voluntary Sector Hub opened at the end of 2014 creating a single point of access where residents can access timely information and advice from multiple agencies in one visit. In addition to this, the new web portal called 'My Care My Support' was also launched to support adults and their families to find out about what services and support is available in their local area. **75% of service users said in 2016 that they had access to advice and information, up from 74% in 2015 and in line with similar authorities.**

Local Indicator :Waiting Times for Assessment. D55 Contact to start of Assessment within 5 days.

RED. DOT 

We monitor three local waiting times indicators, which measure each stage, from first contact with the client, to start of assessment (D55), contact to end of assessment (NI 132) and then end of assessment to provision of service (NI 133).

Of the three measures, D55 is the most important, as it ensures that all new people contacting us receive an initial assessment in a timely manner. Personalisation does not necessarily sit well with the other two waiting times indicators, as the client has more choice and control over how long it takes to complete their assessment and put services in place.

The provisional result for the year is 83.91% of assessments started within 5 days, which is below the target of 85%, but an improvement on 2014/15 result of 79%. Across providers the result varies, with Seqol 76.64%, Avon & Wiltshire Mental Health Trust (AWP) achieving 99.72%.

Front Door Activity

Performance Assessment

Safeguarding Update

Since 1st April 2015, Adult Services brought the management of the safeguarding cases back into the local authority to support the change in legislation from the Care Act and to consolidate practices. The new team has implemented new processes and procedures. The number of alerts received has increased to 1119 at the end of March 2016, compared with 717 for year ending March 2015.

The number of concerns being raised are still increasing, however the number of referrals requiring an enquiry (under Section 42 of the Care Act 2014) has not increased to the same level. (415 cases progressed to an enquiry). This means that many of the alerts are focusing on quality issues rather than abuse and neglect. The Safeguarding Adult Board continues to monitor this, as it may indicate that there may be a need to consider changes to training and awareness on what should or should not be referred through to the safeguarding team.

There have been 175 referrals relating to 'Self Neglect' which is a significant number of concerns that would not have been included in the figures in previous years (self neglect only came under safeguarding arrangements from 1st April 2015). Most of these identified a need for a service with 25 progressing to an enquiry. Again, some better awareness raising with agencies raising such alerts could be necessary. Overall, the establishment of a single point of referral is considered to be effective and welcomed by partner agencies.

Overall 70% of service users say they feel safe, up from 65% in 2015 and of those, 91% of service users say services make them feel safe, both of those indicators are an improvement and better than the national average.

Strengths

- ✓ Although numbers of contacts have grown on the previous year, demand is showing signs of being managed with reduction in the proportion of assessments progressing to a service
- ✓ Both our main providers have redeveloped their client access points to support a more streamlined journey across health and social care for the adults
- ✓ My Care My Support Web portal is being used by local people to get timely appropriate information and awareness of how to access local providers
- ✓ A new streamlined pathway has been set up for Safeguarding concerns

Challenges/Risks and Mitigation

- Increased activity coming into Adult Social Care puts pressure on waiting times and we are exploring with the voluntary sector how to give improved advice and information.

Prevention

Performance Assessment

Intermediate and Reablement Services

Adult Social Care commission prevention and early intervention services that are key to maintaining and prolonging peoples own independence. They help to give stability when there is a carer breakdown or when people find themselves in crisis situations. This year we have increased our intermediate care provision, Step-up Crisis support to reduce hospital admission and to facilitate appropriate discharge, we have commissioned additional bridging and discharge services which is key in reducing our delayed transfers of care.

Our reablement service has two elements, a domiciliary service and a residential placement service. In 2015/16 we have seen an increased number of older people accessing reablement following a hospital episode, last year it was 45 older people, this year it is 171 older people. This has improved our coverage and support offered to people in helping them maintain independence.

ASCOF 2B(1) Proportion of older people still at home 91 days post discharge from hospital who received reablement on discharge. GREEN. DOT ↓

2015/16 out-turn is 85%, a drop from the previous year of 93.2%, target for the year was 93%, however the comparator data is 81%. It is important to note that our previous year results were based on much smaller numbers of people equating to 45 and 2015/16 equates to 171 people. Of those 25 people that were not at home 91 days post, 13 were deceased rather than having moved into a placement.

NI 135 Carers receiving an assessment or review. GREEN. DOT ↔

This indicator supports personalisation, helping to maintain the independence and resilience of service users and their carers being supported within the community. As well as the two main providers, this indicator is supported by the Swindon Carers Centre, who complete assessments which are then validated by an SBC care manager.

The result for the year is 89.95% equating to 1369 carers receiving an assessment or review of need, 2 up on the previous year result of 1367 carers who received an assessment therefore performance is being maintained.

Strengths

- ✓ Stronger embedded support for crisis prevention and rehabilitation delay, the need for long term mainstream packages
- ✓ Increased numbers of carers being offered an assessment of need reduces the risk of carer breakdown

Challenges/Risks and Mitigation

- Consistency across providers to support carers which will be monitored with recommendations for improvements through contract meetings

Personalisation

Performance Assessment

ASCOF 1C Part 1A Proportion of Clients using Social Care who receive Self Directed support or direct payments. RED. DOT ↑

This KPI is an 'AS AT' the last day of the year, so represents a 'snapshot' not a 'during the year picture'. Our provisional result for 2015/16 as at 31st March 2016 is 82.56% equating to 1184 adults receiving a personal budget or direct payment, there is a national target set for this KPI that 100% of eligible community based clients have a personal budget. Although we are showing an improved position on 2014/15 of 72%, we still have more work to do with the 2014/15 England average, at 82.6%. Commissioners continue to work closely with providers especially AWP to improve access to self directed support. Despite this performance, **the number of service users who say they have control over their daily life increased to 78% better than similar authorities.**

ASCOF 1C Part 2A Proportion of Clients with a Direct Payment. DOT ↑

This is a subset of above, reflecting those who receive their personal budget through a direct payment. It reflects increased independence by being able to purchase support directly with providers rather than through managed services. Our provisional 2015/16 result is 24.6% increasing from 20% in the previous year and the national average for this in 2014/15 was 26.3%. More work has to be done with commissioners and providers looking at how to promote and improve take up across both clients and carers.

ASCOF 1C Part 1B Proportion of Carers using Social Care who receive Self Directed support or direct payment. DOT ↑

Our provisional result for 2015/16 is 34.16%, an upwards improvement from 2014/15 result of 32% but still well below the 2014/15 national average of 77.4%.

ASCOF 1C Part 2B Proportion of Carers with a Direct Payment. DOT ↑

This is a subset of the above KPI reflecting those carers who receive their personal budget through a direct payment. It reflects increased independence by being able to purchase support directly with providers rather than through managed services. Our provisional result for 2015/16 is 33.78% increasing from 31% in 2014/15 however again, well below the 2014/15 national average of 66.9%.

Performance Assessment

Mental health

The total number of service users with a mental illness supported at the end of March 2016 was 483. Proportion of adults in contact with secondary mental health services who live independently, with or without support and those in employment.

In relation to mental health, social care provides good support with over 74% of service users living independently which is an improvement and substantially better than the national average and similar authorities.

11.5% of service users were in employment which is an improvement and better than similar authorities and the national average.

Learning Disabilities

Supporting people with a learning disability accounts for the largest spend in adult social care at £23m. Year on year, young people entering the transition from children and education to adult services, account for significant financial challenges. A transition team has been established with a revised transition policy to improve the experience of young people.

Proportion of adults with a learning disability who live on their own or with their family and those in employment

The number of people with a learning disability living on their own or with family increased to 71% which is slightly better than the South West average but lower than in similar authorities and nationally. A housing work stream has been established to improve performance and new supported housing is being built for 2017. The percentage of people in employment also reduced to 3.65%. Access to employment and training has been identified as a corporate priority and a Transitions Programme commenced in June 2016 to improve in this area.

Strengths

- ✓ More people suffering from mental ill health are living independently and are in employment
- ✓ A new Transition Programme is being established to improve performance in employment and training
- ✓ Planning events have taken place with young people and their families which were evaluated positively

Challenges/Risks and Mitigation

- Need to increase access to employment and training for young people with a learning disability
- Need to start transition planning earlier for young people with special educational needs

Performance Assessment

Social Care Client Numbers

In 2015/16 we saw a 5.1% increase in the number of clients who received a service from us during the year rising from 5,274 in 14/15 to 5,547 in 15/16. Older people numbers changed from 3404 to 3628 during the year a 6.5% increase, younger adults saw a 2.6% increase moving from 1870 to 1919.

Local D40 Clients who received a service during the year who received an annual review of need.

GREEN. DOT ↑

This is now a local KPI that looks at people who have been in receipt of a service during the year, who have received an annual review of need. As it is a client count, it does not take into account multiple reviews where individuals may have received more than one in the year but increasing the number of people, who receive at least one review per year, is key to our aims to ensure we are appropriately meeting the current needs of individuals.

The provisional result for 2015/16 is 72% equating to 3992 people who received an annual review, above target for the year of 71%. This is an increase on the previous year when 3829 people had received a review of need.

Broken down, our result shows 85.2% of Mental Health clients had a review, 52.76% of Learning Disability clients and 71.8% of Seqol clients received a review of need. The Learning Disability team came back in-house in October, where a new management team was appointed and new processes and practices are being embedded. Ongoing work continues to address recording and improve quality which will show results within this KPI.

Satisfaction with services is good with 66% of service users satisfied with their care and a quality of life score of 19.3 which is slightly better than other authorities. More service users use as much social contact as they would like, rising to 49% which is better than similar authorities.

Strengths

- ✓ Better understanding of the issues relating to personalisation have consolidated understanding and enabled better detailed plans to support change and move forward
- ✓ Numbers of annual reviews are up, ensuring clients can access personal budgets and are receiving the appropriate support for their needs

Challenges/Risks and Mitigation

- Close monitoring of AWP progress for personalisation
- Improve quality and recording across all teams
- Implementation of online assessment which will support person-centred discussions

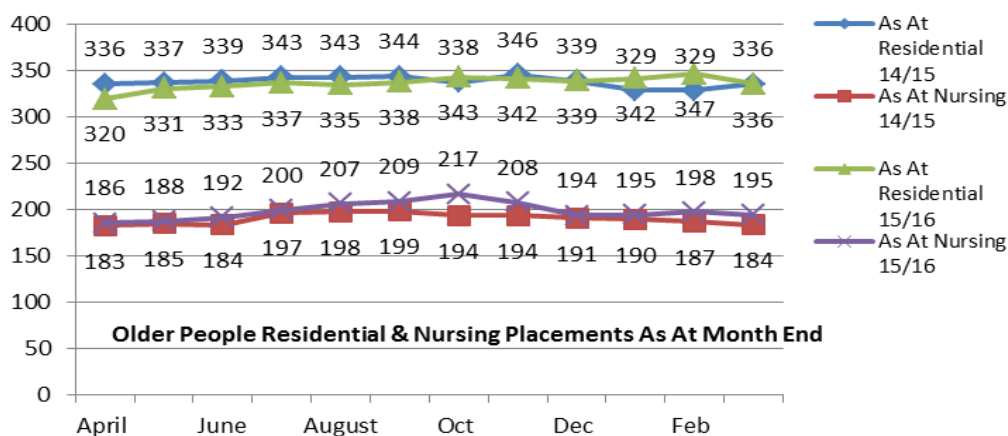
Admissions

Performance Assessment

ASCOF 2A(2) Adults aged 65+ admitted into permanent residential or nursing care per 100K population. Green . DOT ↓

It is recognised that the admissions indicators (ASCOF 2A 1 & 2A 2) are joint indicators with commissioning and both providers to ensure the strategies are in place and working to support only necessary and appropriate admissions to care.

The provisional result for 2015/16 is 682.48 per 100k population (pending the new population figure being released shortly) equating to 220 admissions for older people, slightly higher than last year at 676 per 100,000. These placements are split between 98 into nursing care and 122 into residential care home. We are well within target for the year and only 2 placements above 2014/15 even though population. Graph below shows how static placements are within older people over the last 2 years.



ASCOF 2A(1) Adults aged 18 – 64 admitted into permanent residential or nursing care per 100K population. Green ↑

At the end of 2015/16 we made 12 admissions for younger adults, equating to a ratio of 8.89 per per 100k population, (pending a new population figure being released shortly). This is one placement above target for the year, but an improvement on the previous year where 15 younger adults were placed. Broken down across categories, there were 5 Learning Disabled adults, 4 with Mental Health support needs and 3 with Physical Disabilities.

Strengths

- ✓ Admission rates for both age groups are being managed and are still comparatively good and figures are impacted by a small number of 60 – 65 year olds admitted to residential care

Challenges/Risks and Mitigation

- Further work with Children's Services and Education to reduce admissions to residential care through Transition Programme

Health

This performance report is based on activity as at December 2014.

Performance Assessment

Urgent Care

Working in partnership with the Great Western Hospital to avoid unnecessary hospital admissions and support people in the community.

Fix Me Hub (Urgent Care GP / Nurse Centre): – the GP/Nurse-led Urgent Care Centre was opened to take pressure off the Emergency Department at GWH. Since April 2015 to the end of March 2016 there have been 25,201 attends at the GP/Nurse led Urgent Care Centre (Clover) against a target of 10,950 attends.

Out of Hours: - The Urgent Care Centre continues to provide an effective out of hours service, taking demand away from A & E. For the full year, the number of Primary Care Contacts was 4,817 against a target of 3,063. All aspects of the service continue to cater for an increasing and unprecedented demand.

Delayed Transfers of Care: - CCG / SEQOL and the Council have continued to work with GWH to improve patient flow and reduce the number of delays within the system. Work is continuing with renewed focus around quality around the discharge procedure.

Since July 2015 additional services have been commissioned to support the pathway, adding capacity to beds and additional domiciliary care services. Monitoring is showing a reduction in social care attributable delays since January 2016.

ASCOF 2C Part 1 Average number (snapshot) of Delayed Transfers of Care per 100k pop attributable to both NHS and Social Care. **RED.** ↑

Our provisional result is 14.8 per 100k population which is an improved picture on the previous year of 16.2. The South West comparator average result is 17.4 and the provisional national average is 12.3 rising from 11.1 in 2014/15.

Our delay reasons broken down below.

	Completion of Assessment	Public Funding	Further non acute NHS Care	Placement: Residential	Placement: Nursing	Care Package in own home	Community Equip	Patient or family Choice	Disputes	Housing	LA YTD	Total
Swindon	41	12	34	33	66	69	13	22	0	6		296

Health

This performance report is based on activity as at June 2015

Performance Assessment

ASCOF 2C Part 2 Average number (snapshot) of Delayed Transfers of Care per 100k pop attributable to Social Care. **RED.** ↓

Our provisional result for this is 8.3 per 100k population which is up from 2014/15 of 6.9 per 100k pop. This result is mainly due to issues early on in the year that increased our delayed days, however much work has happened within the last 6 months to improve reporting and recording of who is attributable and pathways for people to reduce the delays and improve the flow. The last quarter results have shown definite improvements and put us in a much stronger position for the new year. South West comparator average result is 7.0 and the provisional national average is 4.8 per 100k population.

The breakdown for reasons of delays is shown below.

	Completion of Assessment	Public Funding	Further non acute NHS Care	Placement: Residential	Placement: Nursing	Care Package in own home	Community Equip/adapti on	Patient or family Choice	Disputes	Housing	LA YTD Total
Swindon	32	7	n/a	22	48	49	4	5	0	n/a	167

There is also a Better Care Fund Delayed Transfers of Care KPI which monitors all delays during the year attributable to both health and social care.

Provisional result for this is 374.5 per 100k population, against a South West average of 494.2 and a provisional national average 351.4.

Strengths

A number of initiatives are in place, funded by CCG to reduce admission to hospital through Urgent Care Centre and SUCCESS centres supporting capacity in primary care (GP).

Challenges/Risks and Mitigation

- Delayed transfers continue to challenge and a Programme Board has been established across GWH, Seqol, CCG and the Council to reduce delays which is meeting fortnightly and has produced reductions in delays for Swindon. Further work is required with front line health and social care professionals to support patients who are well and to be discharged returning home as quickly as possible.

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NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

Author: Gill May, Executive Nurse

Wards: All Wards

Locality Affected: All Locality Area

Parishes Affected: All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update of performance and key issues relating to Swindon CCG.
- 1.2 A key purpose of the Adults Care, Adults Health and Housing Overview and Scrutiny Committee is to hold Commissioners of Health and Social Care Services to account.
- 1.3 Any Commissioner of Health and Social Care Services in Swindon is required to provide information on the planning and provision of health and social care services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

3. Detail

3.1 What are the challenges that your organisation is facing?

Top Priorities	Process	Outcomes
Financial Challenges	<p>As part of Swindon CCG's annual planning cycle, a financial plan has been submitted to NHS England which details the required savings we as a CCG are required to make, which are £8.8m to during 2016/17.</p> <p>The CCG's quarterly assurance meeting was held with NHS England on 9 May. Discussions were positive and supportive of the CCG's actions to address the continuing performance issues facing the local health system, while acknowledging the challenges the CCG now faced in respect of the financial plan for 2016/17.</p>	Swindon CCG is working closely with all its providers and partners to review options for managing its budget carefully whilst maintaining excellent levels of care and managing ever increasing demand for its services. Swindon CCG is amongst many CCGs in the country facing increasing system pressure and therefore demands on finances going forwards.
Primary Care Commissioning	Swindon CCG continues to work closely with NHS England to jointly commission GP primary care services, through both its primary care operational group and the joint primary care commissioning committee.	The Swindon Estate Strategy will continue to be developed by the CCG, aiming to provide good strategic estate planning by bring together commissioning intentions and models of delivery for health and social care services across the Swindon and Shrivenham area.

NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	<p>As part of this, Swindon CCG is currently developing an Estates and Primary Care Development Strategy to ensure the effective provision of primary care for years to come throughout Swindon.</p>	<p>The initial local priorities are to ensure that the strategic areas in Swindon, identified as areas of significant population growth, have appropriate commissioning plans for the health and social care required for those areas, as well as ensuring that existing primary care medical service facilities are fit for purpose.</p> <p>The 4 main residential developments which have significant population growth which require priority for health and social care estates planning are:</p> <ul style="list-style-type: none">• Wichelstowe East• Kingsdown• Tadpole Village (North Swindon)• New Eastern Villages (Rowborough and South Marston) <p>Swindon CCG is working closely with NHS England to plan for and procure appropriate services for these new areas, a market engagement event was held at the Jurys Inn on 27 May to notify potential providers that Swindon will be developing new primary care services linked to the housing developments. The CCG will bring back updates in coming months.</p>
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NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

Sustainable Transformation Plan	<p>As part of the five-year planning requirements outlined by NHS England, Swindon CCG has been included in a regional footprint, which sees Bath and North East Somerset CCG, Swindon CCG and Wiltshire CCG coming together to identify within our five year plans where we could deliver services across a wider geographical patch, at scale and at pace. Other Swindon organisations included in the development of this plan are SBC, GWH and SEQOL, as well as counterparts from Bath and Wiltshire.</p> <p>The national guidance determines the expectation of footprints, including a submission of an outline plan on 11 April with a fuller plan to be submitted on 30 June.</p>	<p>The 11 April submission outlined the key challenges in relation to 'Health and Wellbeing', 'Improving the care and quality of services' and 'Improving productivity and closing the financial gap'. The plan is now being developed further by leads from within each partner organisation and will form the basis of the 30 June submission.</p> <p>Following the submission of the outline plan on 11 April, the Sustainability and Transformation Board met and agreed a governance structure and key streams of work to be progressed in the next six weeks to enable the footprint to submit their outline draft plan at the end of June.</p>
Transforming Care Partnership	<p>In 2012, following an investigation into criminal abuse at Winterbourne View Hospital, the Department of Health initiated a national programme of action "Transforming Care" to transform services for people with learning disabilities and/or autism who have mental health conditions or behaviours that are challenging.</p>	<p>Swindon and Wiltshire have developed a joint TCP in order to outline and ascertain the action required over the next three years to ensure adequate support for those with learning disabilities and autism at times of escalating challenging behaviour.</p> <p>Our plan is currently with NHS England for final approval, and the TCP Swindon and Wiltshire joint programme board will be meeting to approve the proposed delivery strategy.</p>

NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

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Date: 21 June 2016

	Transforming care aims to reshape services for people with learning disabilities and autism away from institutional models of care, closing some inpatient provision and strengthening the support available in the community.	Central to our plans, Swindon and Wiltshire will actively involve service users, carers and representatives in each key aspect of the plan. Both Healthwatch organisations are supporting this, alongside Carer's Groups and Service users.
Personal Health Budgets	<p>A Personal Health Budget (PHB) is an amount of money to support a person's individual health and wellbeing needs, as agreed between the individual and their local NHS team. A person's health and wellbeing needs will be set out in a person-led care plan which will be developed by the person together with a health care professional. How the budget will be used to support the health and wellbeing needs will be set out in a person-led support plan agreed by both the person and the local NHS team.</p> <p>Swindon CCG's policy and approach to delivering Personal Health Budgets can be found on the CCG's website¹.</p>	<p>Plans are in place for the priority and ongoing identification of people who have the right to have, and who may be interested in, a PHB and to support them to explore and/or take up a PHB. This includes people with a Learning Disability/Autism and high support needs as well as children with education, health and care plans, who could benefit from a PHB/joint budget.</p> <p>Swindon uptake of PHBs is currently less than 0.5% of all individuals eligible for CHC/CC and living in the community.</p> <p>Support will continue for the existing groups as they develop. Plans to expand PHBs to people with Long Term Conditions, Mental Health, Acquired Brain Injury and Spinal Injury will be developed, to include work to increase understanding of costs and impacts</p>

¹ <http://www.swindonccg.nhs.uk/index.php/your-health/personal-health-budgets>

NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	Swindon CCG view Personal Health Budgets as a tool to support personalised care. As such, Swindon CCG will continue to ensure a focus on personalised care planning which could result in a Personal Health Budget being offered. This recognises, however, that a Personal Health Budget will not be available to all in scope to the Local Offer and that Personal Health Budgets are targeted to those with the highest and most complex needs, which represents a small part of the population.	on current commissioned services. The Local Offer will be refreshed for 2017-18.
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3.2 What have you done well?

	Steps taken	Next steps
Community Services re-procurement	<p>In partnership, Swindon CCG and Swindon Borough Council carried out a thorough programme of engagement as part of the community services review of 2016. Themes from this engagement programme informed the decision to procure community services, with a new contract starting in February 2017.</p> <p>Swindon CCG & Swindon Borough Council have formally gone to market to procure Adult Community Services through a Public Contracts Regulations 2015 'Light Touch Regime'.</p>	<p>The Invitation to Propose a Solution was released to Potential Providers on 11/05/2016, with a Clarification Period of between 10/05/2016 to the 10/06/2016. The closing date for submission is midday 23/06/2016 with the Preferred Potential Provider decision being announced 15/09/2016.</p> <p>To support this procurement, we are currently seeking applications for the role of Public and Patient Representatives to be involved in the procurement of community health services.</p>

NHS Swindon Clinical Commissioning Group

Adults Care, Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	<p>The Capable Provider will be the provider or providers that are most capable of:</p> <ul style="list-style-type: none"> • meeting patients' needs and improving the quality and efficiency of services; • Supporting the transformation of services; • Delivering the services in an integrated way; • Providing best value for money in doing so. 	<p>Public and Patient representatives will be the voice of the community and will support the programme by:</p> <ul style="list-style-type: none"> • Reading bids from the providers of services. • Attending meetings to evaluate these bids • Giving their views about which provider(s) should deliver the services • Helping to develop ways to check the successful provider is providing the quality and standard of service we expect.
Primary Care	<p>Primary Care in Swindon is transforming at pace and operating at scale and practices are reporting significant financial pressure as income levels remain static but expenses rocket in light of new requirements, complexity of cases, rising activity and increased burden of inspection i.e. CQC.</p> <p>The NHS has issued a Five Year Forward View and more recently a Forward View for General Practice which outlines the desire to transform the NHS, particularly Primary Care, at pace by moving towards a whole system approach with practices collaborating to operate together at larger scale, sharing management, pooled resources and reducing costs.</p>	<p>Swindon CCG have held three workshops to explore with practices the opportunities afforded by bringing practices together to form a not for profit cooperative. This proposal has been well received and 25 out of the 26 local practices have signed up to the concept. The practices are now working together to develop this further. We will update the Committee on progress in future reports.</p>

NHS Swindon Clinical Commissioning Group

Adults Care, Adults Health and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

3.3 Supporting Information

3.3.1 None

4. **Alternative Options**

4.1 None.

5. **Implications, Diversity Impact Assessment and Risk Management**

Financial and Procurement Implications

5.1 None.

Legal and Human Rights Implications

5.2 None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 None.

Diversity Impact Assessment

5.4 None.

Risk Management

5.5 None.

6. **Consultees**

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. **Background Papers**

7.1 None.

8. **Appendices**

8.1 None.

Further information on the subject of this report can be obtained from Robin Butcher, 01793 683700, communications@swindonccg.nhs.uk

Great Western Hospitals NHS Foundation Trust Update
Adults Health, Social Care and Housing
Overview & Scrutiny Committee **Date: 21 June 2016**

Author:	Kevin McNamara, Director of Strategy, Great Western Hospitals NHS Foundation Trust
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Health, Social Care and Housing Committee with an update of performance and key issues relating to Great Western Hospital NHS Foundation Trust.
- 1.2 A key purpose of the Adults Health, Social Care and Housing Overview & Scrutiny Committee to hold Providers of Adults Health Services to account.
- 1.3 Any provider of Adult Health Services in Swindon is required to provide information on the planning and provision of adult health services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

Detail

2.3 What are the challenges that your organisation is facing?

Top Five Priorities	Process	Outcomes
Junior doctors' contract	<p>The British Medical Association Junior Doctors Committee (JDC), NHS Employers and the Secretary of State for Health have reached an agreement on the new junior doctors' contract.</p> <p>The detailed contract, which is due to be published at the end of May, will include a combination of agreed terms from February negotiations and new provisions as outlined in the briefing statement from Acas which available on the NHS Employers website.</p>	<p>There has been a commitment that no further strike action will be called while the referendum is underway between 17 June and 1 July.</p> <p>Some elements of the new contract, if approved in the referendum, will be implemented in August and all junior doctors will move on to the agreed new terms between October 2016 and August 2017.</p>
Recruitment	<p>Maintaining a strong staffing level is an on-going challenge, as while more staff join, others retire or leave.</p> <p>In April we made 157 offers to nurses in India, who could be with us as soon as next winter and we have also offered nursing roles to an additional 20 nurses from Spain and Portugal.</p>	<p>Closer to home we continue to raise awareness of the career options with the Trust, especially among younger people living locally.</p> <p>Our work with schools, colleges and universities is raising awareness of routes into the NHS and the diverse range of opportunities available.</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

		We also want to attract people looking for a career change or those who might consider returning to a career in healthcare and continue to offer our free Return to Practice and Return to Acute Care courses.
Waiting times for planned procedures	<p>We remain focused on reducing and maintaining lower waiting times, against increasing demand.</p> <p>In April, 90 per cent of all patients waiting for treatment, waited less than 18 weeks from the time of their referral.</p> <p>The national target is for 92 per cent of all patients waiting for treatment, to begin their treatment within 18 weeks of referral.</p> <p>The junior doctors' strikes in April had an impact on waiting times, as although no operations were postponed due to careful planning, around 80 operations which could have taken place did not.</p>	<p>We continue to work with our commissioners on reducing the time our patients have to wait to begin treatment.</p> <p>Some of the things we are doing include providing extra clinics and operating lists throughout the week and at weekends, to help reduce some of our longer waiting times.</p> <p>We are reviewing our data to ensure we are booking patients in the most appropriate order, so those who have been waiting the longest are prioritised.</p> <p>We are also looking at how we can reduce the number of physical appointments, by offering telephone appointments.</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

		This is helping to improve the patient experience, while allowing consultants more treatment time.
Staff car park expansion at GWH	<p>Parking is often a frustrating experience for patients, visitors and staff and we are exploring what longer term solutions may be possible, given our financial position.</p> <p>In the meantime, building work to expand the staff gravel car park, making room for 400 extra spaces, began in May.</p> <p>This will make things easier for staff with the greatest need to park, as well as our patients and visitors, by freeing up more spaces in the visitor car parks.</p>	<p>The staff car park expansion is expected to be complete by the end of August, with some of the spaces being available from July. This will bring the total number of staff spaces to 1,750.</p> <p>To reduce the demand on the car park between Monday and Friday, some of our teams are now also offering appointment slots at the weekend.</p>
Operational pressure on the Emergency Department	<p>Since the beginning of the year, the Emergency Department at the Great Western Hospital has experienced significant pressure.</p> <p>Attendances remain high, with the Emergency Department seeing an average of 231 patients each day, with a third (31 per cent) of patients requiring hospital admission.</p>	<p>We continue to work on improving patient flow and the speed of our discharges, so that emergency patients needing admission can experience a smooth and timely transfer.</p> <p>Work is also on-going with our health and social care partners, as well as our colleagues in the local media, to remind local people of actions they can</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	<p>Despite this high demand, there has been a significant improvement in the number of patients admitted, discharged or transferred within four hours of arrival.</p> <p>During the last week of May (23-29 May), 92 per cent of patients were admitted, discharged or transferred within four hours of arrival to the Emergency Department, an improvement of sixteen per cent (from 76 per cent in Apr), although still below the national target of 95 per cent.</p>	<p>take to support their local hospital. This includes looking out for elderly friends and relatives, seeking medical help early on and choosing the most appropriate healthcare option.</p>
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2.4 What have you done well?

Top Five Achievements	Steps taken	Next steps
Sustainability and Transformation Plan	<p>We are working with other local health and social care organisations to discuss how health and care services should be developed over the next five years to support the delivery of improved health and to meet the needs of the local population.</p> <p>Every health and care system in England will produce a multi-year Sustainability and</p>	<p>The plan will be submitted this month, with a view to implementation starting in autumn 2016.</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676; kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	<p>Transformation Plan, showing how local services will evolve and become sustainable over the next five years – ultimately delivering the Five Year Forward View vision of better health, better patient care and improved NHS efficiency.</p> <p>Within our geographical footprint of Bath and North East Somerset, Swindon and Wiltshire, the local health and care system will be developing a plan to help drive genuine and sustainable transformation in patient experience and health outcomes of the longer-term.</p>	
Nominations for Oxford Brookes University Placement of the Year Award 2016	<p>Ten of our teams have been nominated for the Placement of the Year Award in Oxford Brookes 2016 Placement of The Year Awards.</p> <p>The awards celebrate health and social care providers who offer excellent student placements and nominations are made by students.</p> <p>Every year, our Student Placement Team helps around 500 student nurses get their first experience of working on the wards, providing</p>	<p>We invest a lot in supporting, mentoring and training opportunities for our students, in the hope that the experience they have with us encourages them to consider us as a future employer.</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	a link with universities such as Oxford Brookes, Bournemouth University and the University of the West of England.	
Radiotherapy Appeal one year anniversary	<p>Brighter Futures celebrated the first anniversary of its appeal to bring radiotherapy to Swindon with the news that almost £2,000 has been donated every day since its launch on 28 May last year.</p> <p>The current total stands at around £685,000.</p>	<p>We are working in partnership with Oxford University Hospitals Foundation Trust on plans to expand its radiotherapy service with a new facility at the Great Western Hospital in Swindon by 2018.</p> <p>Meaning local cancer patients no longer have to make the 70-mile round trip to Oxford for treatment.</p> <p>The £2.9 million being raised by Brighter Futures will fund specialist equipment needed to provide radiotherapy treatment.</p>
International Clinical Trials Day	<p>To mark International Clinical Trials Day, patients, their families and carers were reminded to speak up and ask their nurse or doctor if there are any clinical trials or health research which they could take part in.</p> <p>The Research and Innovation Team at the Great Western Hospital are supporting the</p>	<p>Clinical research helps the NHS identify the best interventions and treatments for patients, which have the potential to improve the lives of those affected now, and in the future.</p> <p>More volunteers are needed to take</p>

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

	<p>National Institute of Health Research's 'Ok to Ask'.</p> <p>People may not realise that we are a very active Trust in terms of research and innovation and there is lots going on behind the scenes.</p> <p>Getting involved in research brings a number of benefits including early access to new treatments and helping better treatments become available on the NHS.</p>	<p>part in clinical research if this vital work is to continue.</p> <p>There are currently over 100 trials taking place across Great Western Hospitals NHS Foundation Trust in areas such as Rheumatology, Diabetes, Cardiology and Paediatrics and Cancer.</p> <p>We hope the campaign encourages patients to let their doctor or nurse or know if they are interested in taking part in research.</p>
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3. Alternative Options

3.1 None.

4. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

4.1 None.

Great Western Hospitals NHS Foundation Trust Update

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21 June 2016

Legal and Human Rights Implications

4.2 None.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

4.3 None.

Diversity Impact Assessment

4.4 None.

Risk Management

4.5 None.

5. Consultees

5.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

6. Background Papers

6.1 None.

7. Appendices

7.1 None.

Further information on the subject of this report can be obtained from Kevin McNamara, 01793 604676;
kevin.mcnamara@gwh.nhs.uk.

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Avon & Wiltshire Partnership NHS Trust

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

Author: Dr Tina Malhotra
 Wards: All Wards
 Locality Affected: All Locality Area
 Parishes Affected: All Parish Area

1. Purpose and Reasons

- 1.1 This report provides the Adults Health, Social Care and Housing Committee with an update of performance and key issues relating to (provider's name).
- 1.2 A key purpose of the Adults Health, Social Care and Housing Overview & Scrutiny Committee to hold Providers of Adults Health Services to account.
- 1.3 Any provider of Adult Health Services in Swindon is required to provide information on the planning and provision of adult health services within the Borough and consult with the Committee on any planned substantial changes or developments to service provision.

2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of concern that require further investigation.

3. Detail

- 3.1 What are the challenges that your organisation is facing?

Top Five Priorities	Process	Outcomes
Financial austerity	Expected to do efficiency saving in financial year 2016-2017	A cost improvement plan has been made
Recruitment and retention	Trust wide and local drive to attract and retain staff	Improve staffing level and reduced use of agency
Bed pressures (older adults)	Ongoing drive to replicate adult model to later life	Currently no out of area placements; improve DTOC
Liaison service expansion	Expand to seven day working	Business case in preparation

Further information on the subject of this report can be obtained from Deb Hart, 01793 836821, Deb.Hart@nhs.net

Avon & Wiltshire Partnership NHS Trust

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

Awaiting CQC report	Ongoing CQC visit	Looking forward to receiving a positive report from the CQC
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3.2 What have you done well?

Top Five Achievements	Steps taken	Next steps
Bed pressures in adults of working age	Improved acute care pathway	Sustain improvement and replicate model in later life
CQC inspection	Immediate positive feedback from CQC	Implement recommendations when report is out, and sustain improvement
Perinatal pathway	Worked with stakeholders to build a perinatal pathway	Launch pathway in June 2016, and monitor implementation
Leadership	New Interim Clinical Director appointment	Employ substantive positions in locality triumvirate

3.3 **Supporting Information**

3.3.1 None

4. **Alternative Options**

4.1 None

5. **Implications, Diversity Impact Assessment and Risk Management**

Financial and Procurement Implications

5.1 There are no financial and procurement implications contained within this report. Any emerging financial and procurement implications will be detailed if the committee wishes to investigate the issue further or to make recommendations for improvement.

Legal and Human Rights Implications

5.2 There are no legal and human rights implications contained within this report. Any emerging legal and human rights implications will be detailed if the

Further information on the subject of this report can be obtained from Deb Hart, 01793 836821, Deb.Hart@nhs.net

Avon & Wiltshire Partnership NHS Trust

Adults Health, Social Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

committee wishes to investigate the issue further or to make recommendations for improvement.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 None.

Diversity Impact Assessment

5.4 A DIA has not been done for the purposes of this report.

Risk Management

5.5 None.

6. Consultees

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

7.1 None.

8. Appendices

8.1 None.

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Work Programme 2016/17

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

Author:	Director of Law & Democratic Services
Wards:	All Wards
Locality Affected:	All Localities
Parishes Affected:	All Parish Areas

1. Purpose and Reasons

- 1.1 Each Overview and Scrutiny Committee is requested to have a work programme that details the activities that it will be undertaking during the Municipal year.
- 1.2 The work programme details the various topics and issues that each Committee intends to look into during the coming year with the aim of producing evidence based recommendations intended to provide service improvements for Cabinet and external agencies/bodies to consider.
- 1.3 Under the Council's Constitution, Overview and Scrutiny Committees are required to agree a work programme at the start of the municipal year outlining their priorities and likely outcomes of considering these issues.

The work programme is developed taking into account:

- Corporate priorities and objectives, including the Cabinet Forward Plan.
 - Partnership strategic priorities and objectives.
 - The interests and concerns of Members, Council officers, members of the public and other stakeholders such as community and voluntary groups and local businesses.
- 1.4 Committees are encouraged to review the work programme on a regular basis to ensure it remains relevant and to prioritise the workload of the Committee.
 - 1.5 Members are reminded that the work programme must also take into account:
 - The workload of the Committee and of individual members.
 - The capacity of the Scrutiny Unit and other officers to support a review.
 - The resource implications of carrying out a review.
 - The timescales for a review.
 - The most appropriate method of carrying out a review e.g. Committee meeting, Task Group, Member Champion review.
 - 1.6 The Local Government and Public Involvement in Health Act 2007 have presented the Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee with a role, remit and powers regarding local health matters.

Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

Work Programme 2016/17

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

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- 1.7 The Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee is encouraged to be mindful of its role and remit when considering a work programme for the 2016/17 Municipal Year.

2. Recommendations

The Committee is recommended to:

- Consider and discuss the Chair's proposal for the 2016/17 work programme.
- Approve the proposed Work Programme for the 2016/17 Municipal year.
- Appoint Members to any Task Groups agreed by the Committee.

3. Detail

- 3.1 It is important that Overview and Scrutiny adds value to the work of the Council and the Borough and produces tangible outcomes for local people that result in real service improvements. Selecting the right topics is crucial to ensure that Overview and Scrutiny will be effective.

The work programme will be reviewed at every Committee meeting or as the Committee sees fit to ensure that it remains relevant and that Members and Officers have sufficient capacity to effectively achieve its objectives.

- 3.2 The Work Programme attached at Appendix 1 includes these suggestions and the Committee is asked to approve the work programme for the 2016/17 municipal year.
- 3.3 To assist members in developing the Committee's Work Programme, a copy of the current Cabinet Work Programme and Forward Plan, for the period 20th May 2016 to 20th May 2017, is attached at Appendix 2.

Task Group Reviews

- 3.4 The Committee is required to undertake individual reviews throughout the municipal year and proposals for reviews should be proposed and discussed at the Committee meeting.

4. Alternative Options

- 4.1 The Committee can choose not to have a detailed work programme although it is recommended that it is best practice to do so.

Work Programme 2016/17

Adults' Health, Adults' Care and Housing

Overview & Scrutiny Committee

Date: 21st June 2016

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report. Any expenditure arising as a result of an item on the Committee's work programme will be met by the Overview and Scrutiny Support budget, subject to the approval of the Committee.

Legal and Human Rights Implications

- 5.2 Section 21 of the Local Government Act requires every local authority to establish an overview and scrutiny function to hold the Executive to account, undertake policy development and review, monitor and improve performance.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report. Any further implications will be identified when a topic is reviewed by the Scrutiny Committee and in any recommendations made by the Scrutiny Committee.

Links to One Swindon, Plans and Policies

- 5.4 The remit of the Committee includes the review, scrutiny and development of policy recommendations and the monitoring performance of corporate priorities including One Swindon.

Diversity Impact Assessment

- 5.5 No Diversity Impact Assessment is required at this stage, any DIA that is required during review of topics included within the work programme will be identified at the appropriate stage.

Risk Management

- 5.6 No risk management issues have been identified at this stage. Any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations.

6. Consultees

- 6.1 The Director of Finance (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

- 7.1 None.

Further information on the subject of this report can be obtained from Contact Rita Glen-Gallo, 01793 463410, rglen-gallo@swindon.gov.uk

Work Programme 2016/17

Adults' Health, Adults' Care and Housing Overview & Scrutiny Committee

Date: 21st June 2016

8. Appendices

- 8.1 Appendix 1 – Draft Work Programme for 2016/17.
- 8.2 Appendix 2 – Cabinet Work Programme and Forward Plan for the period 20th May 2016 to 20th May 2017.

Adults' Health, Adults' Care and Housing **Work Programme 2016-2017**

Terms of Reference of the Committee

To fulfil all the functions of an overview and scrutiny committee as they relate to –

- the review, scrutiny, and development of policy recommendations
- the management of performance
- the monitoring of progress towards delivering relevant strategies and corporate priorities
- the formulation of advice for the Cabinet, Council and other partners and stakeholders

To have specific responsibility for (but not limited to) the scrutiny of:–

- Adult Social Care
- Community and Neighbourhoods
- Housing

In addition, as these relate to Adults and Adult Social Care:

- The performance of services seeking to deliver healthy communities towards agreed local and national performance indicators
- Health, health commissioning and service delivery
- Public Health, Health promotion and the work of the Health and Wellbeing Board
- Health Integration and collaborative working and commissioning with Health agencies and providers and General Practitioners

In accordance with Section 7 of the Health and Social Care Act 2001 (as amended), the Adults' Health, Adults' Care, and Housing Overview and Scrutiny Committee will undertake scrutiny of local health service providers jointly with Children's Health, Social Care, and Education Overview and Scrutiny Committee.

Reports for noting

Reports with a recommendation "to note the report" will be included in a separate section at the back of the Agenda and will not be heard at the committee meeting, unless specifically requested by a Member of the Committee.

Review of the Work Programme

The work programme will be reviewed at every meeting of the Adults' Health, Adults' Care and Housing Overview & Scrutiny Committee to ensure that it remains relevant, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate, to ensure that Members and Officers have sufficient capacity to deliver the work programme and to include any additional items on the work programme, if appropriate.

Contact details

Committee Officer: Rita Glen-Gallo
Email: rglen-gallo@swindon.gov.uk
Tel: 01793 463611

21st June 2016		
Item	Objectives	Witnesses
Co-optees Appointment	To confirm the appointment of Co-optees to the Committee.	Chair
Work Programme discussion	To set the work programme for the forthcoming municipal year and agree Task and Finish Groups and Membership on to those groups.	All
Performance update reports	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Presentation of these reports will be limited to 5 minutes.</p> <p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p>	<p>Great Western Hospital (GWH)</p> <p>Avon & Wiltshire Mental Health Partnership (AWP)</p> <p>NHS Swindon Clinical Commissioning Group</p> <p>Adult Social Care Commissioning (ASCC)</p> <p>SEQOL</p>
27th September 2016		
Item	Objectives	Witnesses
Update reports	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Presentation of these reports will be limited to 5 minutes.</p> <p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p>	<p>Adult Social Care Commissioning (ASCC)</p> <p>Avon & Wiltshire Mental Health Partnership (AWP)</p> <p>Great Western Hospital (GWH)</p> <p>NHS Swindon Clinical Commissioning Group</p> <p>SEQOL</p>
End of life care	To receive a report regarding end of life care.	SEQOL

6th December 2016		
Item	Objectives	Witnesses
Performance update reports	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Presentation of these reports will be limited to 5 minutes.</p> <p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p>	<p>Adult Social Care Commissioning (ASCC)</p> <p>Avon & Wiltshire Mental Health Partnership (AWP)</p> <p>Great Western Hospital (GWH)</p> <p>NHS Swindon Clinical Commissioning Group</p> <p>SEQOL</p>
Housing Report	To receive a report providing an overview of the Housing demand for those receiving Adult Social Care	Housing

7th February 2017		
Item	Objectives	Witnesses
Update reports	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Presentation of these reports will be limited to 5 minutes.</p> <p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p>	<p>Adult Social Care Commissioning (ASCC)</p> <p>Avon & Wiltshire Mental Health Partnership (AWP)</p> <p>Great Western Hospital (GWH)</p> <p>NHS Swindon Clinical Commissioning Group</p> <p>SEQOL</p>
Learning Disabilities Transition Pathway	To receive an update regarding the transition programme for young people from children and education services to adult social care.	Adult Social Care (ASCC)

25 th April 2017		
Item	Objectives	Witnesses
Update reports	<p>To receive regular performance reports from Commissioners and Providers.</p> <p>Presentation of these reports will be limited to 5 minutes.</p> <p>Members are requested to raise questions in advance so that the relevant Stakeholder is available for questioning at the meeting.</p>	<p>Adult Social Care Commissioning (ASCC)</p> <p>Avon & Wiltshire Mental Health Partnership (AWP)</p> <p>Great Western Hospital (GWH)</p> <p>NHS Swindon Clinical Commissioning Group</p> <p>SEQOL</p>
Review of the Year	Chair of Dementia Care Pathway Task Group to present the final report and recommendations to the Committee.	

TASK GROUPS

Item	Objectives
Dementia Care Pathway	To look at the partnership arrangements and whether the health journey is working for the patient.

Swindon Borough Council

CABINET WORK PROGRAMME AND FORWARD PLAN

20 MAY 2016 - 20 MAY 2017 – Proposed AGENDA ITEMS and KEY DECISIONS (as at 13/06/16)

Key Decisions are defined as:

- a) decisions that are likely to be significant in terms of spending or savings having had regard to the Council's budget for that particular service or function, and
- b) decisions that are likely to have a significant impact on two or more Council wards.

If you wish to make your views known on any matter set out in this work-plan, please contact the relevant Cabinet Member or the contact officer identified.

Councillor:	Portfolio:
David Renard	Leader of the Council and Chair of Cabinet
Russell Holland	Deputy Leader of the Council and Vice-Chair of Cabinet and Cabinet Member for Finance and Corporate Services
Oliver Donachie	Cabinet Member for Housing and Homelessness
Toby Elliott	Cabinet Member for Strategic Planning
Fionuala Foley	Cabinet Member for Children's Services
Brian Ford	Cabinet Member for Adults' Health and Social Care
Dale Heenan	Cabinet Member for Sustainability and Transport
Mary Martin	Cabinet Member for Communities
Garry Perkins	Cabinet Member for the Economy, Regeneration and Skills
Keith Williams	Cabinet Member for Streetsmart

Cabinet Member Decisions Proposed for May 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
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Cabinet Meeting Date - 16th June 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Council Plan 2016-2020	No	Leader of the Council	Cabinet	N/A Date of Notice: 28 January 2016	Head of People, Performance and Engagement Tel: 07823 525337 or Email: smowbray@swindon.gov.uk	N/A
Housing Revenue Account - Medium Term Financial Plan	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 15 th February 2016	Board Director Resources (S151 Officer) or Paul Smith Tel: 07500 884176 or Email: psmith@swindon.gov.uk	N/A
Lydiard Park and House - Future Operational Model	No	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 12 th February 2016	Board Director Resources (S151 Officer) or Rachel Watts, Tel: 07823 525297 or Email RWatts2@swindon.gov.uk	Cabinet Minute 58 2015/16 refers
Budget Out-turn and Management 2015/16.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 10 th June 2015	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring Out-Turn	No	Cabinet Member for Finance,	Cabinet	N/A Date of	Board Director Resources (S151 Officer) or Ian Burbidge, Finance,	N/A

2015/16		People and Performance		Notice: 10 th June 2015	Tel: 464384 or Email: iburbidge@swindon.gov.uk	
Treasury Performance 2015/16	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 10 th June 2015	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk	N/A
Local Transport Plan - Implementation Plan	No	Cabinet Member for Sustainability and Transport	Cabinet	N/A Date of Notice: 15 th February 2016	Head of Highways and Transport Tim Price Tel: 01793 466254 or Email: tprice@swindon.gov.uk	N/A
Reference from the Independent Remuneration Panel on Councillors' Allowances.	No	Leader of the Council	Cabinet	N/A Date of Notice: 1 st July 2015	Director of Law & Democratic Services (Monitoring Officer) Tel: 463012 or Email: staylor@swindon.gov.uk	N/A
Waste and Recycling Strategy	Yes	Cabinet Member for Streetsmart	Cabinet	N/A Date of Notice: 14 th March 2016	Head of StreetSmart Leon Barrett Email: lbarrett@swindon.gov.uk Tel: 07818 510602	N/A
Community Governance Review Update	Yes	Leader of the Council	Cabinet	N/A Date of Notice: 26 th	Director of Law & Democratic Services (Monitoring Officer) Stephen Taylor Tel: 01793 463012	N/A

				April 2016	Email staylor@swindon.gov.uk	
Financial Context including the future of grounds and street cleaning services	Yes	Leader of the Council	Cabinet	N/A Date of Notice: 27 th April 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Bus Subsidies	Yes	Cabinet Member for Sustainability and Transport	Cabinet	N/A Date of Notice: 27 th April 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
New Eastern Villages - Use of Compulsory Purchase Powers	No	Cabinet Member for Communities and Strategic Planning	Cabinet	N/A Date of Notice: 4 th May 2016	Head of Property Assets Rob Richards Tel: 01793 463521 Email: rrichards@swindon.gov.uk	N/A
Regeneration Opportunities at Cheney Manor Employment Area	Yes	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 4 th May 2016	Head of Property Assets Rob Richards Tel: 01793 463521 Email: rrichards@swindon.gov.uk	N/A

Cabinet Meeting Date - 13th July 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2016-17	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 1 st July 2015	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Education Transport Policy 2017-18.	Yes	Cabinet Member for Children's Services	Cabinet	Stakeholder and Public Consultation Date of Notice: 1 st July 2015	Head of Education Services Tel: 463067 or Email: pnathan@swindon.gov.uk	N/A
Securing a Sustainable Future for Swindon's Libraries and Community Services	No	Cabinet Member for the Economy, Regeneration and Skills	Cabinet	N/A Date of Notice: 12 th February 2016	Head of Localities and Volunteering or Patric Weir Tel: 07946 595852 or Email: pweir@swindon.gov.uk	Cabinet Minute 58 2015/16 refers
Land at Oakfield	Yes	Cabinet Member for Communities and Strategic Planning	Cabinet	N/A Date of Notice: 4 th May 2016	Head of Property Assets Rob Richards Tel: 01793 463521	N/A
Fixed Penalty	No	Cabinet Member	Cabinet	N/A	Head of Planning, Regulatory	N/A

Notice Enforcement Policy		for Housing and Homelessness		Date of Notice: 7 th June 2016	Services & Heritage or Kathryn Ashton Email: Kashton@swindon.gov.uk Tel: 01793 466113	
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Cabinet Meeting Date - 4th August 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Future Direction - Proposal for consultation	Yes	Leader of the Council, Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services and Cabinet Members for Streetsmart and Communities	Cabinet	N/A Date of Notice: 7 th June 2016	Director of Law & Democratic Services (Monitoring Officer) Head of Finance and Change Kirsty Cole Tel: 464610 Email: kcole@swindon.gov.uk	N/A

Cabinet Meeting Date - 7th September 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Medium Term Financial Strategy - update for presentation to the Secretary of State before 14th October 2016	No	Cabinet Member for finance, people and performance	Cabinet	N/A Date of Notice: 12 th February 2016	Board Director Resources (S151 Officer) Stuart McKellar Tel: 01793 463300 or Email smckellar@swindon.gov.uk	Cabinet Minute 59 2015/16 refers
Budget Management 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 21 st October 2015	Board Director Resources (S151 Officer) or Kirsty Cole Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 11 th September 2015	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk.	N/A
Options for reducing street lighting energy usage	No	Cabinet Member for Sustainability and Transport	Cabinet	N/A Date of Notice: 12 th February 2016	Head of Highways and Transport or Tim Price Tel: 01793 46 6254 Email: tprice@swindon.gov.uk	Cabinet Minute 69 2015/16 refers
Securing a	Yes	Cabinet Member	Cabinet	N/A	Board Director Resources (S151	Cabinet

sustainable future for Swindon's Cultural Assets		for the Economy, Regeneration and Skills		Date of Notice: 12 th February 2016	Officer) or Rachel Watts Tel: 07823 525297 Email: RWatts2@swindon.gov.uk	Minute 58 2015/16 refers
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Cabinet Meeting Date - 19th October 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 13 th October 2015	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or email: kcole@swindon.gov.uk	N/A
Education Transport Policy 2018-19	Yes	Cabinet Member for Children's Services	Cabinet	N/A Date of Notice: 26 th May 2016	Head of Education Services or Emily Heaton Email eheaton@swindon.gov.uk Tel: 01793 465769	N/A

Cabinet Meeting Date - 7th December 2016

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
2017-2020 Financial Context and Budget Proposals 2017/2018.	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 9 th December 2015	Board Director Resources (S151 Officer) Tel: 463300 or Email: smckellar@swindon.gov.uk	N/A
Capital Programme Monitoring - Second Quarter and Treasury Management Performance 2016/17.	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Notice of decision: 9 December 2015	Board Director Resources (S151 Officer) or Paul Smith Tel No: 463976 e-mail: psmith2@swindon.gov.uk	N/A

Cabinet Meeting Date - 8th February 2017

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget 2017/18 and Beyond	No	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Treasury Strategy Statement 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Housing Revenue Account - Rents and Charges 2017/18	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 07500 884176 or Email: psmith2@swindon.gov.uk	N/A
Swindon Pay Policy	Yes	Cabinet Member	Cabinet	N/A	Head of People, Performance and	N/A

Statement 2017		for Corporate, Customer and Digital Services		Date of Notice: 22 nd April 2016	Engagement Tel: 07823 525337 or Email: smowbray@swindon.gov.u	
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Cabinet Meeting Date - 15th March 2017

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring 3rd Quarter 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk	N/A

Cabinet Meeting Date - 26th April 2017

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2016/17	Yes	Cabinet Member for Finance, People and Performance	Cabinet	N/A Date of Notice: 22 nd April 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A

Cabinet Meeting Date - June 2017 (TBC)

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Housing Revenue Account - Medium Term Financial Plan	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 th May 2016	Board Director Resources (S151 Officer) or Paul Smith Tel: 07500 884176 or Email: psmith@swindon.gov.uk	N/A
Budget Out-turn and Management 2016/17.	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 th May 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 464610 or Email: kcole@swindon.gov.uk	N/A
Capital Programme Monitoring Out-Turn 2016/17	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 th May 2016	Board Director Resources (S151 Officer) or Ian Burbidge, Finance, Tel: 464384 or Email: iburbidge@swindon.gov.uk	N/A

Treasury Performance 2016/17	No	Deputy Leader of the Council and Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 27 th May 2016	Board Director Resources (S151 Officer) or Paul Smith, Finance, Tel: 463976 or Email: psmith2@swindon.gov.uk	N/A
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July 2017 (TBC)

Subject	Key Decision Yes/No?	Portfolio Holder / Cabinet Member	Decision Maker	Method of Consultation Undertaken / To be Taken	Contact Officer	Available Background Papers
Budget Management 2017-18	No	Cabinet Member for Finance and Corporate Services	Cabinet	N/A Date of Notice: 7 th June 2016	Board Director Resources (S151 Officer) or Kirsty Cole, Finance, Tel: 01793 464610 or Email: kcole@swindon.gov.uk	N/A