



STOCKPORT
METROPOLITAN BOROUGH COUNCIL

Adult Social Care

Portfolio Performance and Resources Final Update Report 2017/18



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ADULT SOCIAL CARE PORTFOLIO OVERVIEW



Portfolio Summary

This is my final update report for 2017/18 which provides a summary of progress in the delivery of portfolio priorities, performance, and resources.

I'm pleased to report that the Stockport Carers Charter developed and funded by Adult Social Care has been adopted by the Stockport Together Partners. An action plan to underpin the charter is being developed with each of the participating organisations.

The Adult Autism strategy is now published on the councils 'Autism webpage'. Staff participated in the planning and delivery of the GM Mayors 'Making Greater Manchester Autism Friendly' event in December which was highly over-subscribed demonstrating the level of interest in autism across the region.

I am very pleased to report that the quality of nursing home beds in Stockport (measured using CQC inspection reports scores) is now above the average of GM authorities. In April 2017 the percentage of nursing home beds rated as good or outstanding was 40% the latest CQC data for November provides evidence that this has increased to 66%.

The external workforce development group has been developing training proposals in relation to the external market. An annual care conference is being proposed to help progress training passports and career pathways, and we are seeking to engage with colleges and students taking Health and Social Care related courses to help raise the profile and recognition of careers in care.

During this quarter Stockport Together conducted a public consultation (10th Oct – 30th Nov 2017) on the future shape of our Health and Social Care Services. Responses were received from a number of individuals and a wide range of organisations. The independent analysis of all the feedback we received has been published in the report 'Stockport Together Independent Consultation Analysis'.

We have been notified that the Care Quality Commission will be conducting a local system review of Health and Social Care in Stockport. I will provide updates on this review in future portfolio reports.

At the Great North-West Care Event our Enhanced Support Team were recognised for their outstanding work by being awarded the Best Care Team award, and I would like to congratulate them on receiving this prestigious award and to wish them the best of luck for the National Awards.

Significant financial pressures on the Adult Social Care budget continue. The deficit at Q3 is forecast to be £0.584m.

Cllr Wendy Wild, Deputy Leader and Portfolio Holder for Adult Social Care



Revenue Budget (Forecast)

	£000
Cash Limit	69,839
Outturn	70,423
(Surplus)/Deficit	584
'Approved Use of Reserves' Total	5,505
Utilisation of 'Approved Use of Reserves' in the above forecast.	4,743
'Approved Use of Reserves' Balance	762

Capital Programme

	£000
2017/18 Capital Budget	338
2018/19 Capital Budget	1,698
2019/20 Capital Budget	0

1. ADULT SOCIAL CARE PRIORITIES, PERFORMANCE, RISKS AND OPPORTUNITIES



1.1. Priorities and Delivery Update

Caroline Drysdale has been appointed as the new Managing Director for **Stockport Neighbourhood Care (SNC)** and will take up her post in January 2018. An Alliance Agreement is now in place which has allowed the provider organisations to develop integrated services under a single line management: Stockport Neighbourhood Care.

Stockport Neighbourhood Care reports into a provider Alliance Board which has senior representation from the four provider organisations –the Foundation Trust, Stockport Council, Viaduct Care (Stockport GP federation) and Pennine Care NHS Foundation Trust.

1.1.1. Integrating health and social care

Core Neighbourhoods

The Council and its partners are continuing to develop the neighbourhood model, working as eight teams with Primary Care at their centre. The design process with GPs explores how they will work together to integrate health and care services to deliver services in neighbourhoods in response to the specification shared with Viaduct in quarter 1. The specification aimed to transform the way in which GP services are delivered and include direct access to physiotherapy, extended hours for GPs, pharmacy and medicines management. Some of the initiatives are now starting to be implemented.

This quarter has seen the arrival of the Interim Chief Officer for Viaduct, who has been driving forward implementation plans. Recruitment to General Practice Leadership posts for each neighbourhood has been undertaken this quarter. The workforce plan and service redesign implementation continues. New Social Care Officers are picking up cases, and the new Support Worker roles have been further rolled out across neighbourhood teams.

The Falls Service has commenced operating, and will be fully recruited by the end of December. The Enhanced Care Home Team is already intensively supporting a number of providers across the borough. The nursing posts for this team have an anticipated start date of January 2018. The Home Care project has commenced delivery of the WIRE (additional step up home care) and Better at Home additional hours, and intensive work is underway with the selected providers to optimise the number of hours being offered.

The period of wide-scale formal workforce consultation has concluded, and Unions and Leaders are working closely together to move forward with proposals to implement the extended operating hours model. Further work also continues on key job descriptions and person specifications. The Allied Health Professionals Review has been completed, and implementation plans are being finalised.

An Enhanced Case Management rapid deployment plan has been put in place to jointly drive forward the model implementation at pace. Staff training has commenced; multi-disciplinary meetings are happening on a fortnightly basis in each neighbourhood; and

each neighbourhood has started to manage a number of cases using the new model. Interim information, management and technology systems continue to be refined, and work is underway to deliver longer term solutions to support the new model.

Recruitment to all posts in the All Age Psychological Medicines Service (AAPMS) has been successfully completed and the service has commenced in the most high-demand neighbourhoods of Victoria and Tame Valley. The team have moved to Hollins House to sit alongside the Marple Integrated Team, and are sourcing clinic space to be able to deliver services within neighbourhoods.

Boroughwide Services

Performance in terms of Delayed Transfers of Care (DToC) has improved due to the successful deployment of Transfer to Assess (T2A) and Active Recovery. T2A will continue to be rolled out to remaining pathways.

Notice has been served on the Mastercall contract for the provision of a Hub and Crisis Response Service. The Hub will become part of the Pathfinder contract and the clinical element of the Crisis Response Service will be provided in-house at Kingsgate from November.

Work with care homes to identify step up crisis response beds has been successful and contracts are being prepared. Work is continuing in a number of settings to ensure that people are placed appropriately according to their needs and that their length of stay is minimised where-ever possible. This means ensuring that care home beds are available, home care staff are in place, effective crisis interventions are available and access criteria to services are reviewed and adjusted as needed. For example, following the closure of the community unit at Stepping Hill Hospital, therapy staff were redeployed to support Intermediate Tier beds in a care home to reduce length of stay.

Active Recovery continue to have a presence with the Integrated Transfer Team to support the hospital discharge process and flow through the system. The trial of a dedicated Active Recovery team at Marbury is proving to be beneficial and the flow through the beds has improved.

Accommodation continues to be an issue across Boroughwide Services. Active Recovery is currently based across 3 different sites and although interim solutions are in place, discussions are ongoing with Estates to consider other sites for a long term base for the whole team.

Trusted Assessor training has been rolled out to all T2A in scope staff and has commenced in care homes in support of the short term recovery plan. Training will all be starting within the neighbourhood teams.

Acute Specialist Interface

EMIS viewer went live on November 1st and can now be used by staff to access the most up to date patient record. Staff are being encouraged and supported to use the new system to its greatest capacity. The system is already having an impact. For example, in the Emergency Department (ED), staff can see the most up to date GP record for people who have given their consent on admission.

The new Integrated Care Business Group, part of Stockport Neighbourhood Care (SNC), has two elements – Integrated Neighbourhood Services and Urgent Response. Urgent Response aims to ensure that the hospital front door is outward facing and links effectively to resources in neighbourhoods. Although in the early stages, the move is towards an Urgent Treatment model, where the focus is on deflecting people from the ED, the front door of the hospital, for example by phoning a person's GP for them.

Healthy Communities

We are now developing implementation plans for the Business cases working closely with colleagues in Viaduct Care to take forward those areas where they will be providing services.

The beta phase Community Investment Fund has been launched in early November, to invest £25k in community activities to improve health and wellbeing. Early signs are that there has been a good response.

Health Champions Pilot

Evaluation of the pilot of the wellbeing navigator has taken place in one locality and the pilot is being extended.

A future plan for roll out of health champions is being developed and an event for all health champions is being piloted.

Empowering patients in their communities vanguard

Discussions are progressing with a number of providers to support the development of this programme, and action plans are now emerging.

The Patient Activation Measure (PAM) is an evidence based assessment tool that is being piloted. It assesses a person's competence, motivation and skills to make changes and an intervention is then developed based on their score.

It means that interventions can be tailored more closely to a person's needs. So if a person has a low activation score they will need more one to one support whereas if it's a high score, they can be directed to a website for self-care.

The PAM is currently being piloted with Life Leisure on the exercise on prescription scheme and they are finding it both useful and effective. It is also likely to be used by the Multidisciplinary Team in the new Enhanced Case Management programme.

Connecting and supporting carers

Latest data on the new Carers Connect website, hosted by Signpost Stockport, shows there were 1200 visitors to the site in the last 6 weeks. The online carers' forum was launched in October and 11 volunteers have been recruited and trained to moderate the website and engage with users. The numbers using the forum are low so far but is expected that it will take a little time for usage to escalate and further promotion campaigns are planned. Signpost currently has around 440 followers on Facebook and its FB posts in the last month were seen by nearly 7.5k people.

232 'hidden' carers have been newly engaged by the project in the last year, exceeding the target of 200.

Voluntary Sector Support for Discharge

Now re-branded as Back Home, the project leads have been working to integrate the two elements of the project (WIN and TPA) into one team with streamlined processes.

The activity levels rose in October, with 154 individuals supported, despite losing one of the WIN workers and continuing work to bed in the new ways of working. This post has now been filled but in doing so created a vacancy in the TPA part of the team. Part-month figures show that the number of referrals has increased again to 162 to 27th November, suggesting the changes are beginning to show positive impact.

According to the business case modelling, even at the lower level of activity delivered to date, the project is estimated to be delivering savings that significantly outweigh its costs. The team will continue to work as part of the Integrated Transfer Team and Active Recovery Team to increase referrals and progress will be closely monitored.

1.1.2. Supporting people and their carers, through the work of the preventative services and initiatives

Preventing vulnerability

The six commissioned preventative services continue to work across a range of needs to deliver non-statutory services to prevent or delay crisis, deterioration and the need for formal health and social care services. All services are moving towards the third year of their three year contract. It is intended to undertake a comprehensive review of the current offer against the original objectives in order to ensure that preventative commissioning strategies and services are fit for purpose and to inform the commissioning strategy for the next two years. Feedback from neighbourhood teams has highlighted that there is still some confusion amongst practitioners about the remit of individual services and the range of activity provided. Therefore a new "Guide for Colleagues" leaflet has been developed to assist in clarification. A leaflet for members of the public to highlight the services available is also being updated and revised. The aim is to raise awareness of what is available and promote the preventative services in order that people can self-refer. The intention is to put the leaflets in GP surgeries, pharmacies, supermarkets and other public places, and also to give them out at events.

Preventative services contracts are amongst those which are being reviewed and contract value renegotiated as part of the savings proposals for Adult Social Care and Public Health. There is a risk that reductions in contract value may result in a reduction in service provision in the future. Initial engagement with the current providers provided an opportunity to notify them that the contracts review will be outcomes led and to receive some early feedback. Consultation will be ongoing throughout the renegotiation process and an assessment of the impact resulting from any changes to specific contracts will be undertaken with individual providers.

Tackling Domestic Abuse

Please see update at 1.1.6, p12 - Implementing strategies and action plans for Domestic Violence

Support to people and their carers to establish or sustain independent living

The adult social care community capacity workers have been working hard to contact and meet with various carers' activity and support groups across Stockport. Part of their task has been to ensure that the support on offer is promoted appropriately, for example via social media; the Council Website, or Carers Connect and Carelink.

Adult Social Care has also provided funds to extend work with a specific group of older carers who are isolated; are struggling with complex and challenging situations; and have had a diagnosis of dementia or another life limiting diagnosis themselves whilst providing significant care for someone else.

Improving the health and wellbeing of people and their carers

Carers Connect is receiving an increasing amount of contacts and the 'What's On Guide' details lots of activities and events aiming to improve the health & wellbeing of carers. The online forums are now live. In partnership with continuing education, 35 carer volunteers have received IT & social media training at an accessible level to support them to engage and stimulate conversations online, and there are future plans in place to train more carers.

Adult social care has developed a Wellbeing plan, and the document has now been adapted to sit on the Carers Connect website in order to assist carers to think about their own wellbeing and life outside of the caring role.

A carers' Winter Wellbeing day is being held on 11 December 17 at the Alma Lodge.

Supporting Informal Carers

The Stockport Carers Charter was developed and funded by Adult Social Care and has been adopted by the Stockport Together partners. The Charter is now live and commits the participating organisations to four work priorities:

- the identification of people with a significant caring role
- work in partnership with carers
- the provision of good quality relevant information, advice and support for carers
- supporting carers with their health & wellbeing

The Carers Charter is being widely publicised. An action plan to underpin the Charter is being constructed with each of the participating organisations formulating work plans to deliver against 3 of the stated priority outcomes over the coming year. This work will be monitored on a quarterly basis.

1.1.3. Supporting people and their carers, through the work of the preventative services and initiatives

The new Service Manager is now in post and has met with Stakeholders including staff groups in Pennine Care, carers groups and third sector organisations.

A business case has been drafted for the review of Mental Health Services that are commissioned by the Council. The approach will need clear sight of the work across strategic partners, including the Clinical Commissioning Group (CCG), Pennine Care and third sector organisations. The review will also need to align to the National and Regional

Mental Health Strategic priorities and local CCG investment plans. This will ensure there is an increased investment in Mental Health locally, which is driving towards parity of esteem for Mental Health provision. A review of the current service provision is expected to be undertaken in the first quarter of 2018 with an implementation plan being developed by June 2018.

The Mental Health Alliance contract is to be extended for a further 12 months from 1st April 2018, in light of the need to evaluate and review all contracts and align the commissioning strategy.

Care Act Compliance

Care Act Compliance will be key to any review. However work is already underway to progress on the following areas:

- Developing a Fairer Charging Policy within working age adults with a Mental Health difficulty. Charging procedures are already in place for residential services which are non S117 funded both in working age and older age adults Community Mental Health Teams (CMHTs). Older age adults CMHTs also currently have charging procedures in place for domiciliary care provision.
- Developing an electronic assessment which aligns Care Act Assessment documentation and processes with the Care Programme Approach. Aligned with this work is the promotion of awareness and use of Care Act Advocates. The current assessment pro forma in use for working age adults accessing Mental Health services continues to pose a risk, as it is not Care Act Compliant.
- Reviewing existing arrangements and ensuring robust systems are in place in relation to the safeguarding of adults using Mental Health Services. This work will be undertaken as part of a wider review of Safeguarding Adults procedures and in line with a review of the Multi Agency Safeguarding Adults Policy.
- Ensuring better communication exists between the Adult Social Care Contact Centre and the Pennine Care Access Team is a priority and further work is required to explore the use of a MASSH model for Adults.
- Ensuring that Adult Social Care staff working within Pennine have access to the same training opportunities, HR support and are included in the wider work and communications of Stockport Neighbourhood Care.

Supporting a local model for integrated mental health and well-being.

The situation regarding the refurbishment of Baker Street has progressed, with a plan in place to commence building work in early January. The aim is that the work will be completed to allow the service redesign to commence in early April 2018.

Improving support for people with Dementia

Work is continuing with Stockport CCG, and partners to implement Stockport's 2nd Dementia Strategy which was launched in March 2017.

The new dementia matron at Stepping Hill Hospital is now in post and will be continuing work on Stepping Hill's Dementia Strategy, which aligns with the wider Stockport Dementia Strategy.

The 3 largest dementia drop-ins in Stockport - Heaton Moor, Marple and Reddish - are seeing increasing numbers attending. These drop-ins are providing a vital lifeline in supporting people with dementia and their carers by creating opportunities for informal peer support, information and advice, leisure opportunities and a chance to make new friends.

A successful prevention workshop was held on the 4th October, which brought together staff from the memory assessment service, public health lifestyle services and other key partners to learn about each other's work and consider the opportunities and challenges for making Stockport's lifestyle services more dementia friendly. In the new-year a small task and finish group will be set up to progress this work.

At the beginning of November the Dementia United Partnership Team visited Stockport as part of a series of planned visits to each of the 10 Greater Manchester localities. The aim of Dementia United is to make Greater Manchester the best place to live if you have dementia. The team were interested in the work Stockport is doing in relation to prevention, provision of dementia specific post diagnostic support groups including groups for people with less common dementias, the neighbourhood model and engagement & joint working with voluntary sector partners to deliver dementia 'drop in' sessions. The Dementia United initiative is in a pre-implementation phase, but will create opportunities for Stockport to work with other localities to network, share learning, and improve services. Following the November meeting Stockport has already started work to strengthen its governance arrangements in relation to monitoring improvements in dementia care and support.

During this quarter the Council had started to recruit to the post of Community Capacity Worker for dementia, however the recruitment process has been postponed pending a wider review. A key component of this role was to support the work of the community dementia drop-in's, in addition to working with the wider community to create a more dementia friendly Stockport. We will continue to support the dementia drop-ins through the current network meetings and support from other agencies pending the proposed review.

Age-friendly communities/ Healthy Ageing Strategy

A series of events were held during in the first week of October to promote Age-Friendly Stockport. This included a workshop as part of different approaches to engage local residents in the strategy development process. The output from this workshop has been used to inform the strategy.

The Place Based Initiative work in the Heaton has self-identified as wanting to work to become an Age-friendly Community. One of the first steps in their approach has been to adopt the Take a Seat campaign and this is being linked with the wider Stockport campaign

The Steady in Stockport falls prevention and bone health service has now been launched, and the prevention messages will be further promoted via the website.

A focus on malnutrition will be driven via a 'paperweight armband' project aiming to raise awareness of malnutrition in the over 65 population. This will be launched in the next quarter.

A competition is calling for amateur photographers to snap positive images of ageing. This contributes to the culture change theme of the strategy, seeking to work against ageism.

1.1.4. Remodelling of Stockport Learning Disability Service

Learning Disability Outsourcing project – this work is now complete. The remaining in house service is now ‘business as usual’.

Transforming Care - the Transforming Care Programme aims to ensure that people are discharged from long stay hospitals and to avoid unnecessary admission to hospital. Following the planned closure of Merseycare, some people have been resettled into appropriate local accommodation.

Adopting new models of care – work continues to align local priorities with those of the Greater Manchester Learning Disability Delivery Group. Priorities include the development of the ethical commissioning framework, improving the numbers of people with a learning disability accessing paid employment, scaling up family based care (shared lives) provision, and looking at working more effectively with specialist providers.

The DWP Local Supported Employment pilot has ‘gone live’. The proposed target for Stockport is for a minimum of 10 (25%) of the people referred to the pilot to maintain employment of 16+ hours a week for 13 weeks or more. This increase in capacity within the supported employment service should be reflected in the performance data in quarter 4.

1.1.5. Developing our Adult Autism pathway and strategy

The Adult Autism Strategy is now published on the [Council's Autism](#) webpage after being approved through all required channels. Lead officers for the action plans still need to be identified and the CCG is no further along with commissioning a local diagnostic pathway for adults with autism.

Completion of the autism e-learning by Council staff is presently running at 48% and regular updates are now included in senior manager reports from workforce development so that compliance can be monitored. The aim is to have 100% completion ahead of the launch of the Autism Charter.

Staff continue to work closely with the Greater Manchester Autism Consortium (GMAC) and are involved in planning and delivering the Mayors ‘Making Greater Manchester Autism Friendly’ event in December. The event has been highly over-subscribed which demonstrates the level of interest in autism across the region.

Following on from the successful autism friendly sessions at Cheadle, the library service plans to expand its offer to a 3.30-5.30pm post school session at Bredbury library on a monthly basis. This will be trialed in early 2018.

The second Train the Trainers session for Autism Awareness was a success and a further two joint programmes are being planned for 2018. The Council's training programme for Autism is in further development and will be published by the end of December. It will include a newly developed course on the Mental Capacity Act and Autism, a combined Mental Health and Social Care assessors course and updated awareness courses.

Further training is planned for delivery to DWP staff in December on active case-loads and putting autism awareness into practice. Following on from the Criminal Justice and Autism conference held in November by the National Autistic Society, training is being planned with Greater Manchester Police for new and existing officers on a range of autism related issues. However, planned workshops for autistic adults and professionals about successfully navigating the housing system are presently on hold. The issue is being taken up with Stockport Homes.

The autism social worker post was funded to build knowledge and capacity amongst staff working with people with Autism. The postholder has contributed to the development and delivery of a range of training packages both in Stockport and across Greater Manchester, and supported staff who work with people with autism and complex needs and their families. The autism drop in at Disability Stockport on the first Wednesday of every month has been a particular success. It has evolved into a well-attended group, has developed links with the wider community and has raised the profile of the local authorities 'offer' in relation to autism and adult social care.

Work with the area teams and mental health teams has helped to raise the profile of autism and improve standards of practice. Creating a smoother pathway for people with autism when initially coming into contact with services has been a priority.

1.1.6. Strengthening and reviewing the way we protect vulnerable adults at risk

Progress has continued in developing and implementing the action plan that sits beneath the [Stockport Safeguarding Adults Board \(SSAB\)](#). As previously noted there are four priority themes:

- Complex Safeguarding
- Neglect (including Self Neglect)
- Domestic Abuse
- Transitions

Improving transitions for young people as they reach adulthood

Part of the Transitions work stream is looking those young adults who have suffered adverse childhood experiences and who are presenting to services with complex safeguarding needs.

A review of the Multi Agency Adults at Risk panel and the processes that support it is underway with the aim of having clarity around responsibility across agencies and to ensure that the panel has oversight of tasks.

Alongside this, a review, in conjunction with children's services, will look at the cohort and what service involvement there has been previously to identify themes and trends.

Additionally, this cohort will be the focus of a workshop at the Joint Safeguarding Board's development day in January.

Implementing strategies and action plans for Domestic Violence

The Domestic Abuse Steering Group have held a workshop on learning from Domestic Homicide Reviews to identify themes that will form part of the Domestic Abuse Action

Plan.

Development of the data set is now well underway and proposals will be brought to the next steering group.

A review of how our Independent Domestic Violence Advocates (IDVA) work is underway in collaboration with Stockport Without Abuse. Additional short term funding has been agreed by the Safer Stockport Partnership and an additional IDVA will be recruited to work in the Multi Agency Support and Safeguarding Hub and provide some support for the acute hospital.

All age neglect

The draft Self Neglect Policy has been reviewed by the Stockport Safeguarding Adult Board and is under revision based on the comments received. When finally approved, a training plan will be supported by the workforce development team.

An all age neglect strategy is in development and this will be the subject of a workshop at the Joint Safeguarding Board development day in January.

Improving Complex Safeguarding

Work is underway to further develop the work plan for the joint children and adults' subgroup which has the accountability for complex safeguarding where there is criminal activity – those areas such as Organised Crime, Human Trafficking, Modern Day Slavery and FGM.

A review of the Deprivation of Liberty Safeguards process and procedures is underway and additional training has been arranged for signatories.

Review of safeguarding policies and procedures

The revised [Protocol for Serious Adult Reviews](#) has been approved by the Safeguarding Board and is now on the website.

The Safeguarding Adults policy and procedures will be reviewed by the Policy and Practice subgroup with the aim of revised procedures being in place in Summer 2018. The aim is to ensure consistency and robustness of practice across the system.

Peer Review

A peer review has been agreed with Oldham and will take place in the New Year. This aims to look at the effectiveness and efficiency of safeguarding procedures. Work is underway to complete the self-assessment to support the peer review.

1.1.7 Strengthening the Social Care Market

In this quarter the Council has continued to act through the Joint Commissioning Steering Group in relation to a number of themes for market capacity and development:

1. The financial sustainability group has focused its work on the development of a range of costed options for setting fees for 2018/19 in order that these can be implemented before the start of the next financial year. These proposals will be taken

through the councils governance processes in Q4 in order that the financial implications can be considered as part of the budget setting process for 2018/19. There will be a continued process of communication with providers in relation to contract renewal, commissioning and fee setting processes.

2. The external workforce development group has been developing training proposals in relation to the external market. An annual care conference is being proposed to help progress training passports and career pathways. The group is also seeking to engage with colleges and students taking Health and Social Care related courses to help raise the profile and recognition of careers in care. Recruitment which continues to be a major risk, and options to support the sector through additional training and other 'support in kind' are being explored. A workshop on medication has been held with a range of providers and stakeholders; these initiatives are also seeking to develop and support mutual support networks and enhanced learning across the sector.

There is a great deal of good practice in the sector, and the care, commitment and sheer hard work demonstrated by home managers and staff is not always recognised. Recruitment and retention remains a significant challenge across the region, and social care work is often not given the recognition it is due. In response to this challenge, the Council has worked jointly with the Stockport CCG to host recruitment events, and organised the STAR awards held in February to recognise and reward good practice. The Council has also worked with organisations such as 'Skills for Care' to boost the level of training and support offered to registered managers and staff, and funded specialist workers to share good practice and provide on-site training in Dementia and other areas.

3. Quality and Commissioning - the Enhanced Quality Improvement Programme (EQUIP team) is now in place and working directly with the independent sector, both in relation to care homes and home care. The Assistant Team Manager, Quality Improvement Officers, and Social Worker are working alongside the existing Quality Team, CCG colleagues and partner agencies. The two posts recruited with the CCG (nurse and facilitator) will commence in early January and bring the team to its full complement of staff.

The value of the EQUIP Team is already evident in a number of ways. The Team's intervention, which includes regular weekend work has a) addressed some immediate quality and safety concerns; b) ensured that a required closure was well managed and c) ensured that all residents were moved to more suitable placements through a well-managed transition. Given the vulnerability of the client group, intervention to date has helped mitigate against the risk of avoidable hospital admissions. The Team has also been working with another Home Owner who was intending to withdraw from the market, and was able to engage him in the process of considering alternative options. That owner has now withdrawn his notice and is working with a developer to improve and redevelop both care homes to a higher standard whilst the Quality Team advises on the improvement required to get to 'good'.

Through working in partnership with providers, the overall situation in terms of quality ratings of nursing homes in particular has improved significantly in the last year. In April 2017, the percentage of nursing home beds rated as good or outstanding was 40%; the latest CQC data for November provides evidence that this has increased to 66%. As a result, the quality of nursing home beds in Stockport (measured using CQC inspection

reports scores) is now above the average of Greater Manchester authorities and work with others to share good practice is ongoing.

The work of the EQUIP team builds on the successful pilots led by the existing Quality Team in order to accelerate the trajectory of improvement in order to achieve the Council's ambition for all care homes and domiciliary care agencies to be rated as 'good' or 'outstanding' by 2020. By working closely with the safeguarding team, the regulators and complaints colleagues it will seek to ensure that poor or abusive practice is not tolerated. When not attending to more urgent concerns, the Team works pro-actively to raise standards both in care homes and home care, using the risk profile developed by the Quality Team to ensure that issues and concerns are effectively prioritised.

4. Commissioning, market development and new investment

Re-commissioning Residential/Nursing provision - pre-placement agreements for all Care Homes will be reviewed between now and April 2018, drawing on the existing Quality Team risk profile information.

A key piece of work relates to the condition of building stock across the borough and a meeting has been arranged this week to address the issues arising from this and feed both into the above PPA renewal and any revised market procedures.

Re-commissioning Domiciliary Support - in accordance with the commissioning strategy and agreed timeline, work is taking place to review and revise the current framework for home support. This will incorporate the ethical framework in progress, plus the feedback from engagement sessions with service users. In particular there will be an increased emphasis on 'zoning', helping to reduce travel time and strengthen links between home support providers and locality teams. It is anticipated that proposals in relation to the above will go to Cabinet in Quarter 4 and out to tender immediately after that date. This process is incremental and is undertaken in parallel with other initiatives and would not prevent or slow down any urgent capacity work being undertaken.

Future planning will also take account of ongoing work with Greater Manchester colleagues in relation to new models of care, reflecting and connecting with the strategic framework adopted by SMBC, the draft Joint Commissioning Strategy, the Joint Health and Wellbeing Strategy, the JSNA and the Better Care Fund.

4b (The combined Quality & Commissioning Management Team)

Commissioning and quality colleagues have continued to work together on a process of change management and innovation. This has involved both the development of stakeholder relationships and the investment in new projects. Stakeholder meetings include:

- Monthly 'Quality Issues and Concerns' meeting. This meeting with the Council, CCG, CQC and others ensures a regular oversight of issues affecting the quality of provision in the external market and informs any changes in commissioning
- Provider Forums; these meetings ensure that the Council and partners have regular two way communication with providers across the sector
- Service user engagement; there have now been four 'afternoon tea' events; informal occasions enabling people who use home support services to help improve and shape current provision. Healthwatch Stockport, as an independent watchdog, has very

helpfully hosted these events and is in the process of writing up a report which will feed into the commissioning plans for home support

A programme of new investment using transformation funding has come to fruition in this quarter. Firstly the significant challenges in relation to quality have resulted in the creation of the EQUIP team (see above), building on previous successful pilots. The team is already demonstrating positive outcomes from the additional investment.

Secondly, work has progressed to develop new ways of working in home support, again through a number of pilot initiatives. These are yielding benefits which have resulted in recurrent funding, finding ways to work across both the in-house and external sector to embed locality working, re-ablement approaches and help prevent the need for long term admissions to care homes or hospital.

Given the intensity of demand and pressure on the external market, the challenge in both areas is to continue to 'scale up' and extend these approaches, resulting in a continued trajectory of improved quality, stability and innovation across the external market. This work will be enhanced through the continued development of additional market intelligence, which is already supporting new initiatives.

Work also continues to roll out both the capital funding allocated to support innovation in homes, and also the 'red bag' system to facilitate hospital transfer, based on good practice from the national vanguard.

5. Systems work - Business intelligence has been further developed and is supporting services to map areas for improvement but also identify areas where change is needed. This area of work is likely to develop more in the next year, when the electronic monitoring system (CM2000) is reviewed in conjunction with other new systemic changes. The Quality Team Manager also has a key role in relation to liaison with the Integrated Transfer Team and is also now managing the 'Choosing and Purchasing' system and work is taking place to consolidate these evolving areas of responsibility. Colleagues have visited other areas to learn from different waiting list systems and work is being undertaken to improve live information for ease of use by providers. Work is also taking place to develop guidance on good practice in relation to any home closures. Although this is now relatively rare event it is a complex process and it was felt important both to capture the good practice which had been recognised in Stockport in relation to this, and identify areas for development.




Single case management and finance solution for People's services

Liquid Logic has been awarded the contract to work with Stockport Council. A single solution case management system will be implemented in the first quarter of 2019 across Stockport Family and Adult Social Care. This is a large undertaking and an Implementation Team of project managers, frontline practitioners, service managers, business analysts, system developers, business intelligence officers and project support staff have been set up to oversee the project, working with staff from business support and finance. Whilst the main aim is to implement a new case management system to replace CareFirst & EIS, this is an opportunity to streamline existing processes to improve overall efficiency. The Liquid Logic Implementation Team will be inviting representatives from frontline services to support the project. They will be able to offer input to a number of workshops and focus groups over the coming months to ensure that the project remains practitioner & service

led. We are therefore asking for one or two representatives from each team to act as Liquid Logic Champions.

An Executive Steering Group has been set up as part of an overall governance structure; this is chaired by Andrew Webb and meets monthly. Initial programme set up, data migration and process mapping has started. The infrastructure is now in place and the overall timescales for implementation have been agreed. We expect to have the system live within quarter 4 of 2018/19. A detailed communications strategy has been developed to keep the workforce informed of progress and provide opportunities for their input across Stockport.



1.2. Measuring Performance and Reporting Progress


PI Status	
	2017/18 actual / forecast is significantly below target
	2017/18 actual / forecast is below target but within acceptable tolerance range
	2017/18 actual / forecast is on or above target or within target range

Measures in bold are included within the Corporate Report.

Where there is no performance update because the data is reported annually, bi-annually or in the case of ASCOF 2C, because NHS Digital have suspended reporting on the indicator, they have been removed from the report.

NHS Digital has published a report focusing on the main findings for each measure from the [Adult Social Care Outcomes Framework](#) (ASCOF), England - 2016-17. Key findings include that: the proportion of adults with learning disabilities in paid employment has fallen each year over the last three years, from 6% 2014-15 to 5.7% in 2016-17; and delayed transfers of care from hospital, and those which are attributable to social care, per 100,000 population have risen each year from 2013-14 to 2016-17.

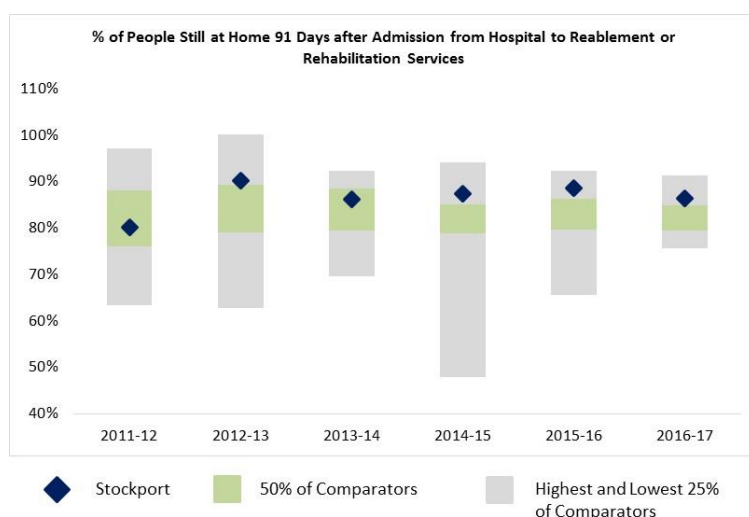
Priority 1: Integrating Health & Social Care							
PI Code	PI Name	Good perform-ance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
ASCOF 2D	Proportion of people accessing short-term services that no longer require long-term packages of care (<i>new name for outcome of short-term services</i>)	High	78.7%	85.4%	85.4%	78.7%	
Measurement of effectiveness of short-term services that re-able people and promote their independence provides evidence of a good outcome in delaying dependency or supporting recovery – short-term support that results in no further need for services.							
ASCOF 2C	Number of people whose delayed discharge from hospital is attributed to adult	Low	26.9	23.0	N/A	18.6	

Priority 1: Integrating Health & Social Care							
PI Code	PI Name	Good perform-ance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
	social care (Delayed transfers of care measure)						
<p>The way in which this indicator is calculated has now changed. It now measures the average number of people delayed per day and the figure for 2016/17 has been re-calculated using the new formula. The Local Government Association and NHS England have set this target for Stockport to achieve by November. It must be noted that this indicator includes ALL the hospitals that Stockport residents are admitted to, not just Stepping Hill. Initial analysis of the Stockport DToc figures for Wythenshawe hospital for the 18 months to September 2017 show a volatile position with figures as low as 9% in February 2017. A recent increase in cases produced a high of 27% in September 2017. Further analysis will be reported in the next quarter.</p>							
ASCOF 2B.1	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital (Better Care Fund measure)	High	86.5%	93.1%	93.1%	88.7%	
<p>This figure has increased by 2.1% on the previous quarter. See below for further trend information. This compares Stockport's performance with that of our comparator group of 16 authorities.</p>							

TARGET ALREADY SET FOR iBCF

Priority 1 – Integrating Health and Social Care

Reablement and Active Recovery clients aged 65+ still at home after 91-Days



- Assuming that number of people covered by this measure will increase slightly this year due to the new intermediate tier.
- Assume it will increase by even more next year (2018/19) as well.
- Likely increase in complexity poses challenges to maintaining our good performance.

Target

- Target of 88.7% for 17/18 set for iBCF

The comparative date for 2016-17 is now included above. Stockport's performance has improved in quarter 3 despite the complex factors that have an impact on this indicator. The status of the indicator has changed to green as the target has been exceeded.

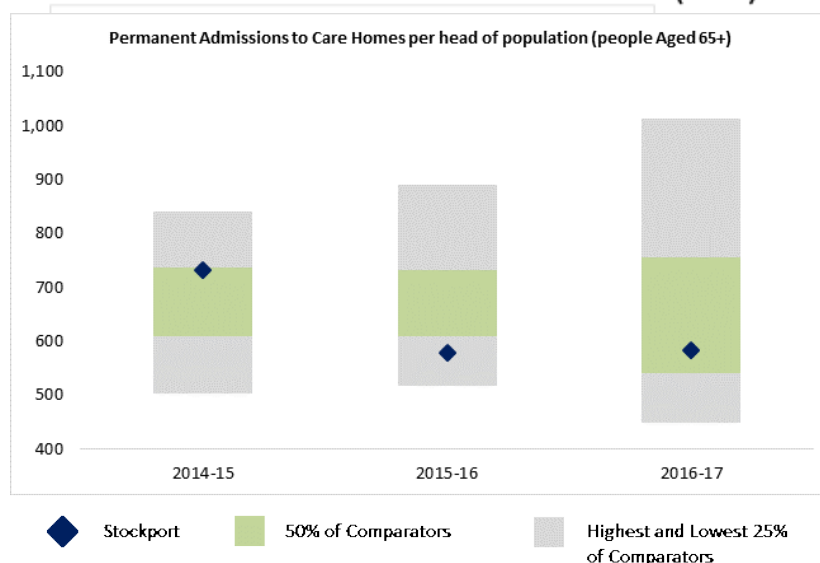
Priority 2: Supporting people and their carers, through the work of the preventative services and initiatives

PI Code	PI Name	Good performance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
ASCOF 1C.1a	The proportion of adults supported in the community who benefit from personalised care and support (%)	High	93.7%	96.4%	Snap shot	95%	✓
Measurement of effectiveness of Adult Social Care services in helping people to choose how their support is provided, giving them as much control as they want of their individual budget. Performance has improved again and has exceeded the target this quarter.							
ASCOF 1C.1b	The proportion of carers who receive a direct payment in their capacity as a carer (%)	High	48.3%	35.8%	Snap shot	Aim to maximise	●
There has been a further dip in performance in quarter 3, down from 45.7%. Action is being taken to identify the factors that influence this indicator for example, are pre-payment cards being recorded as a direct payment by staff? Additional work on improving recording and data quality is underway.							
ASCOF 2A.2	Permanent admissions of Older People (aged 65+) to residential and nursing care homes, per 100,000 population (Better Care Fund measure)	Low	582.6	458.6 cumulative	687.0	571.1	●
Measurement of effectiveness of Adult Social Care services at reducing admission to care homes or care homes with nursing. See table below for additional trend information							

TARGET ALREADY SET FOR iBCF

Priority 2 – Supporting People through Preventative Services

Permanent Admissions to Care Homes (65+)





- Rate affected by population growth circa 1k increase per year in 65+ population
- It will be tough to reduce the current number of people admitted with this population growth
- As expected, some short term placements have become permanent contributing to an increase

Target


- Target of **571.1** set for 17/18

Support to manage permanent admissions to care homes was part of Stockport's bid to the GM Transformation Fund. There has been a significant increase in the number of permanent admissions this quarter from 240.8 to 458.6. As suggested in the last quarterly report, there has now been a policy change to ensure all short term placements are reviewed rather than rolled over.


Priority 3: Redesigning our Mental Health and Wellbeing Strategy and Services

PI Code	PI Name	Good performance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
ASCOF 1F	Proportion of adults in contact with secondary mental health services in paid employment	High	3.5%	6.2%	N/A	3.5%	
ASCOF 1H	Proportion of adults in contact with secondary mental health services living independently with or without support	High	82.1%	86.4%	N/A	82.1%	


Priority 4: Remodelling our Learning Disability Service

PI Code	PI Name	Good performance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
ASCOF 1E*	Proportion of adults with a learning disability in paid employment	High	10.5%	10.8%	N/A	10.5%	

As reported above, the NHS Digital report on the main findings for each measure from the [Adult Social Care Outcomes Framework](#) (ASCOF), England - 2016-17 reveals that nationally, the proportion of adults with learning disabilities in paid employment has fallen each year over the last three years, from 6% 2014-15 to 5.7% in 2016-17. In this context Stockport is performing well on this indicator – indeed performance has improved this quarter.


ASCOF1G	Proportion of adults with a learning disability who live in their own home or with their family	High	93.8%	93.1%	N/A	93.8%	
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Priority 6: Strengthening and reviewing the way we protect vulnerable adults at risk

PI Code	PI Name	Good performance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Target	
NEW	The proportion of safeguarding referrals that result in a Section 42 investigation (%)	High	28.9%	17.1%	N/A	Aim to maximise	

By measuring the number of referrals that result in a Section 42 investigation, it is possible to judge how effective the triage system is at the alert stage of the safeguarding process. If the




Priority 6: Strengthening and reviewing the way we protect vulnerable adults at risk

PI Code	PI Name	Good perform- ance	2016/17	2017/18			Status
			Actual	Q3 Actual	Forecast	Targe t	
triage system is working well, a high number of referrals will result in an investigation, and other alerts will be managed more appropriately.							
NEW	Domestic abuse: re-victimisation rates	Low	210	132 (Q2 YTD)	301	Aim to minimise	
Measurement of services' success at reducing repeat victimisation incidents of domestic abuse. Q3 data is not available. The number of repeat victimisation incidents in Stockport is up compared to the same period last year, rising from 92 by end of Q2 2016-17 to 132 at end of Q2 2017-18. This increase in Stockport is not as great as the increase across GMP however; end of Q2 figures for Stockport are up by 43% compared to last year, but figures for GMP over the same period are up 66%.							

The Office for National Statistics published their statistical bulletin on [Domestic Abuse in England and Wales](#): year ending March 2017. The key findings are:

- An estimated 1.9 million adults aged 16 to 59 years experienced domestic abuse in the last year, according to the year ending March 2017 Crime Survey for England and Wales (1.2 million women, 713,000 men).
- The police recorded 1.1 million domestic abuse-related incidents and crimes in the year ending March 2017 and of these, 43% were recorded as domestic abuse-related crimes; domestic abuse-related crimes recorded by the police accounted for 32% of violent crimes.
- There were 46 arrests per 100 domestic abuse-related crimes recorded by 39 police forces in the year ending June 2017.
- The majority of victims of domestic homicides recorded between April 2013 and March 2016 were females (70%).
- A decision to charge was made for 72% of domestic abuse-related cases referred to the Crown Prosecution Service (CPS) by the police, and of those that proceeded to court, convictions were secured for 76% of domestic abuse-related prosecutions.
- There were 305 refuge services operating in England and Wales in 2017.
- A total of 83,136 high-risk cases were discussed at multi-agency risk assessment conferences in the year ending March 2017, equating to 36 cases per 10,000 adult females.

Priority 7: Strengthening our Social Care market

PI Code	PI Name	Good performance	2016/17	2017/18			Status
				Q3 Actual	Forecast	Target	
NEW	The proportion of Nursing bed capacity in Stockport with an overall CQC rating of good or outstanding	High	40%	66%	N/A	100% by 2020 85% by 2017-18	
NEW	The proportion of Residential bed capacity in Stockport with an overall CQC rating of good or outstanding	High	32%	48%	N/A	100% by 2020 62% by 2017-18	
NEW	The proportion of Home Care Agencies in Stockport with an overall CQC rating of good or outstanding	High	63%	73%	N/A	100% by 2020 80% by 2017-18	

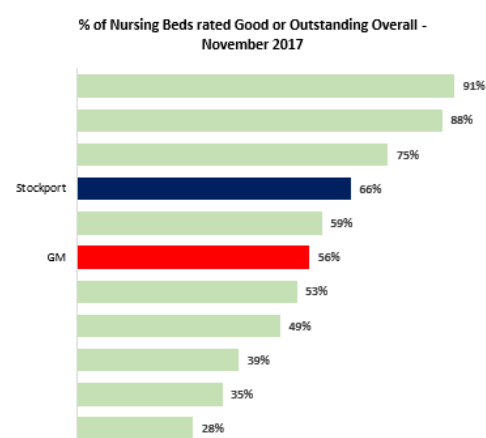
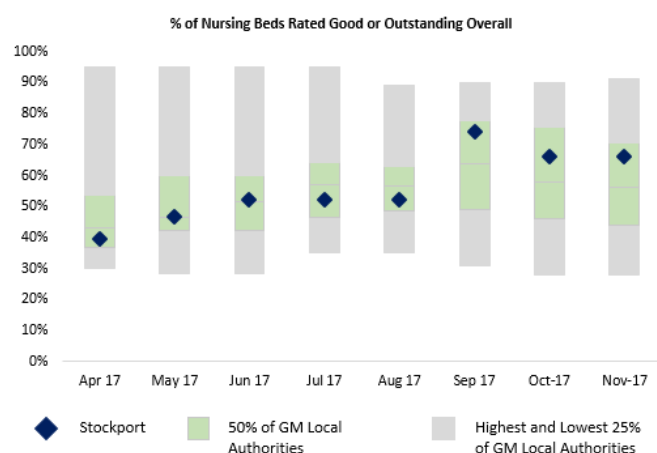
The ambition is for the proportion of nursing beds, residential beds and home care agencies with a rating of good or outstanding to be 100% by 2020. Progression targets have been set for the end of this year – 2017-18. These are challenging targets, particularly as adult social care can only influence rather than control these markets. The role and inspection schedule of the regulator are also important factors.

Since last quarter, there have been significant changes to the CQC ratings of providers in Stockport. One nursing care provider moved from an overall rating of Good to Requires Improvement as the result of an inspection in September. This accounts from the shift in performance from 74% to 66% against this indicator. One Home Care Agency moved up from Requires Improvement to Good following an inspection in October. This resulted in the indicator moving from 63% to 73%. A change in the rating of one provider can have a significant impact on the figures.

It is proposed that an end of year 'state of the market' report on the home care and residential and nursing care markets should be produced that is based on a GM comparison across five domains. This will take into account the new CQC inspection regime and will give a much clearer picture of the health of the social care market.

Priority 7 – Strengthening the Social Care Market

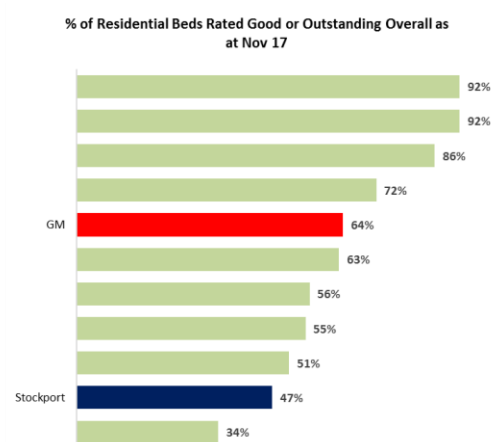
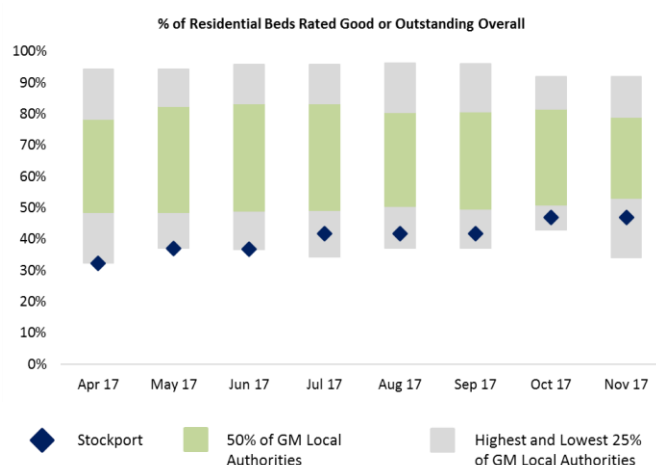
% of Nursing Beds Rated Good or Outstanding Overall



	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17
Stockport	40%	47%	52%	52%	52%	74%	66%	66%

Priority 7 – Strengthening the Social Care Market

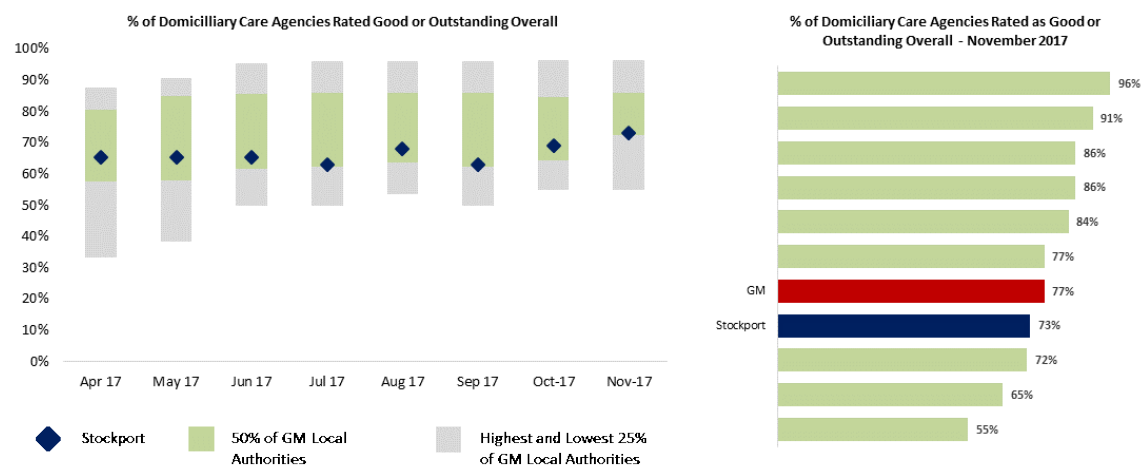
% of Residential Beds Rated Good or Outstanding Overall



	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct 17	Nov 17
Stockport	32%	37%	37%	42%	42%	42%	47%	47%

Priority 7 – Strengthening the Social Care Market

% of Domiciliary Care Agencies Rated Good or Outstanding Overall



	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17	Oct-17	Nov-17
Stockport	65%	65%	65%	63%	68%	63%	69%	73%

1.2.1. Complaints and Compliments

In quarter 2, 2017-18, the Council received 100 complaints in total compared with 95 in quarter 1. In terms of Adult Social Care there were:

- 28 statutory Adults Social Care complaints this quarter, compared with 24 in the previous quarter. However there were 39 complaints in the same quarter last year.
- 3 complaints about Blue Badges, which is the same as in quarter 1
- There were 2 recorded compliments. Early indications are that there are more compliments in quarter 3, particularly around the 'front end' first contact with staff.

Key issues giving rise to complaints

Issue	Q1 2017-18	Q2 2017-18	Q4 2016-17 Total for year
Quality of care	10	12	30
Staff conduct	7	7	25
Assessment procedures/processes	4	6	32
Delays/funding/fees	3	3	23
Not service specific	1		6
Incorrect information			17
ASC input in joint response			13
Total ASC Complaints	25	28	146

Please note that the totals may be higher than the actual number of complaints received as some complaints relate to more than one service

Stage 1 Complaints by Service Area

Service Area	Q1 2017-18	Q2 2017-18
Integrated Locality Teams (East & West)	2	5
Equipment and Adaptations	2	2
Intermediate Tier	4	3
Learning Disability Social Work Team	1	2
Mental Health Services		2
Client Finance/Income & Assessment	1	1
External ASC Providers (Care Homes)	5	5
External ASC Providers (Home Care)	7	4
Business Intelligence and Service Redesign	1	
Safeguarding	1	
Not service specific	1	4
Total	25	28

There was a slight increase in complaints about the Integrated Locality Teams compared to quarter 1. Complaints about external providers continue to make up a significant proportion of all complaints. It is hoped that the newly established EQUIP Team, working with the Quality Team, will have a significant impact on quality generally, and will also help to achieve the ambition for all care homes to be rated as 'good' or 'outstanding'.

Lessons learned from complaints

One complaint highlighted the importance of ensuring the client's notes record details of all family members who should be consulted or informed of developments in the client's care.

A complaint about care charges found that the Council should be doing more to provide information to clients about charging and help them to understand it.

Local Government and Social Care Ombudsman (LG&SCO)

8 complaints were reviewed, 6 were upheld and 5 of those related to Adult Social Care. The complaints concerned:

- Delayed safeguarding investigation regarding a care home. A payment of £250 was made and a full case review including recommendations was carried out.
- The provision of adequate overnight support by a commissioned service acting on behalf of the Council. A payment of £100 was made and the situation remedied.
- Asking a Care Home to produce a safeguarding report and then questioning why it had done so. The Council apologised.
- Questions about the care and support provided to a person in supported accommodation and delays in responding to the complaint. A payment of £200 was made.
- The LG&SCO and the Parliamentary and Health Service Ombudsman carried out a joint investigation about Stockport Council and Pennine Care NHS Foundation Trust. The complaint concerned a number of aspects of the care provided for the complainant's son. The joint investigation found that the care assessment did not comply with the requirements of the Care Act 2014. The Trust and the Council agreed to reassess the person's care needs.

The Local Government and Social Care Ombudsman has published their [Review of Adult Social Care Complaints 2016/17](#). In that year the LG&SCO:

- Received 3061 complaints and enquiries – a 3% increase from the previous year which included a 16% increase in complaints about care arranged privately with independent providers
- Made 1318 recommendations to put things right including 178 recommendations to improve procedures and 51 recommendations for staff training
- Upheld 67% of investigations about care homes; 65% about home care; 64% about safeguarding; and 62% about charging

1.4 National and Regional Policy Drivers

The **Chancellors Autumn Budget** on 22nd November included £2.8bn more day-to-day funding for the NHS in England, including £350m to address winter pressures on services and an extra £10bn in capital investment across the UK over the course of the parliament. However, there was no additional funding for adult social care and the Association of Directors of Adult Social Services commented that “The extra funding for the NHS will not be as effective without extra money for adult social care, which remains in a perilously fragile state. Adult social care needs to be tackled as urgently and at least as equally as the needs of the NHS, in a way which recognises the inter-dependency of these services and encourages a collaborative approach”.

However, £42m of additional funding for the **Disabled Facilities Grant** in 2017/18 was announced, increasing the total budget for the year to £473m. Details of how this additional funding will be allocated to local authorities has not been confirmed.

Ahead of the Budget, the First Secretary of State and Minister for the Cabinet Office, Damian Green, announced that the government will publish a **green paper on care and support for older people** by summer 2018, rather than this autumn as expected. An independent panel of experts will consult on proposals to improve care and support for older people and tackle the challenge of an ageing population and establishing “a long-term, sustainable solution to providing the care older people need”. The consultation will only focus on older people, and will be subject to a full public consultation after it is published in summer 2018. A parallel consultation on how to fund care for younger disabled adults is expected to follow. Ahead of the green paper, the government has formally scrapped the proposed £72,500 cap on an individual’s social care costs proposed by the Dilnot commission in 2011.

[The Care Quality Commission](#) has published its findings following a **local system review of Halton** in Cheshire. The report is the **first of 20 targeted reviews** of local authority areas, looking specifically at how people move through the health and social care system - with a focus on how services work together.

A number of organisations have published papers commenting on the **long term funding of social care**. These include:

- NHS Digital [Adult Social Care Activity and Finance Report, England 2016-17](#)
- The Voluntary Organisations Disability Group (VODG) has published [‘True Costs: Why we cannot ignore the failure in social care funding’](#).

- iMPOWER [Mission:Possible – how to save £3bn and promote independence in adult social care](#)
- ADASS [Autumn Short Survey of Directors of Adult Social Services 2017](#)
- Independent Age [Will the Cap Fit?](#)

The Government has commissioned an independent review of the **Mental Health Act** which will take into account the Law Commissions review of the law on **deprivation of liberty standards**. The review is due to report in the autumn next years and may lead to new legislation. In the meantime, the government plans to respond in detail to the Law Commissions recommendations in spring 2018.

[The Social Care Institute for Excellence \(SCIE\)](#) has published several resources on the social care experiences of people with **disabilities who identify as lesbian, gay, bisexual, trans, queer, questioning, intersex or who hold identities such as non-binary (LGBTQI+)**. The resources are based on research carried out by the University of Bristol, Regard, SCIE and Stonewall, funded by the National Institute for Health Research School for Social Care Research (NIHR SSCR). They include: a research report; briefings providing information for LGBTQI+ Disabled People who employ personal assistants or support workers, and for personal assistants, support workers, social workers and other social care staff working with LGBTQI+ Disabled People, and two films.

NHS England has announced the [appointment of Ray James](#) as its first **National Learning Disability Director** to drive improvement across the country on services to people with a learning disability, their families and carers. Ray is the former national president of the Association of Directors of Adult Social Services and the long-standing executive director of health, housing and adult social care at the London Borough of Enfield.

Greater Manchester Combined Authority launched its new Strategy, [Our People, Our Place](#). The Strategy was drawn up by the Mayor, all 10 councils, the NHS, transport, the police and the fire service after speaking with businesses, the voluntary and social enterprise sectors, and Greater Manchester residents. It includes 10 priorities:

1. Children starting school ready to learn
2. Young people equipped for life
3. Good jobs, with opportunities for people to progress and develop
4. A thriving and productive economy in all parts of Greater Manchester
5. World-class connectivity that keeps Greater Manchester moving
6. Safe, decent and affordable housing
7. A green city-region and a high quality culture and leisure offer for all
8. Safer and stronger communities
9. Healthy lives, with quality care available for those who need it
10. An age-friendly Greater Manchester

Each priority includes targets, outcomes and ambitions and Implementation Plans and each has a Portfolio leads. Stockport's Chief Executive leads on the Equality, Fairness and Inclusion Portfolio and has responsibilities across priorities 1, 2, 3, 4, 8, 9, 10.

Greater Manchester Health and Social Care Partnership are working with health and social care partners across Greater Manchester to manage pressures on the health and

care system this winter. A new urgent and emergency care hub has been set up to monitor activity across all the hospitals in the region. The hub will predict and respond to pressures building up in A&E departments, provide early warnings, and work with local teams to review staffing levels.

The Partnership has also approved a number of investments including a contribution of £45m for mental health transformation, £41m for primary care, and up to £30m for population health. £11m of our total investment in mental health will be spent on supporting the wellbeing of local communities and localities have been invited to apply for a funding allocation.

1.5 Portfolio Risks

This section provides an update by exception against risks identified within the Portfolio Agreement since the Mid-Year Report. Details of the some of the projects and activities which are helping to mitigate the Portfolio risks are also included in the Priorities and Delivery update in Section 1.1 of the report.

Risk Description	Update on controls and mitigating actions
Home Care capacity in long term private market impacting on ability of Active Recovery to transfer care, impacting flow.	Contracts awarded to private providers for additional dedicated home care hours. The contracts are called Better at Home and WIRE
Staff consultations constrain ability to fully deploy model and associated benefits impact.	To understand revised consultation timeline and assess impact on model
Utilisation of expanded crisis response team dependent on rollout of Enhanced Case Management (ECM)	Acceleration of roll out ECM within neighbourhoods
Challenges reporting against a number of KPI's due to poor data quality/collection	Business Intelligence looking at a solution
Active Recovery currently based across 3 different sites, interim solutions in place	Discussions ongoing with Estates to consider other sites for a long term base for the whole team.
Risk that following review and possible reductions in contract value, preventive services not able to meet expectations	Review governance and structures of preventive services to ensure effective service delivery

2. ADULT SOCIAL CARE FINANCIAL RESOURCES AND MONITORING



2.1 Revenue – Cash limit

	Previously Reported (PPRR Q2) £000's	Increase (Reduction) £000's	Revised Budget at Q3 £000's
Cash Limit	67,922	1,917	69,839

2.1.1 The Portfolio cash limit budget has increased by £1.917m since the PPRR Q2 report. This is due to the following changes:

Portfolio	Description	Movement(s) £000's
Adult Social Care	Homecare hourly rate uplift (£13.60 - £14.12)	363
Adult Social Care	Heys Court - balance of investment	247
Adult Social Care	Residential & Nursing Care ceiling price uplift	801
Adult Social Care	Balance held corporately for NLW / Demand / Price inflation	506
Adult Social Care - Total		1,917

2.1.2 The financial resources deployed in this Portfolio total £69.839m. The outturn forecast at Quarter 3 is a deficit of £0.584m, this equates to 0.8% variance in terms of the total resources available. The following table provides a breakdown of this position:

Service	Current Budget	Forecast Outturn Q3	Total Variation for Q3	Variation Reported for Q2
	£000	£000	£000	£000
Integrated Neighbourhoods	27,852	27,874	22	24
Boroughwide Services	5,448	5,041	(407)	(444)
Learning Disability	27,851	28,560	709	866
Mental Health	5,800	5,800	0	368
Strategy and Performance	(1,125)	(817)	308	94
Prevention	2,459	2,447	(12)	0
Safeguarding	875	890	15	(10)
Stockport Local Assistance Scheme	594	564	(30)	(43)
Other - Support to vulnerable adults	85	64	(21)	(6)
Total	69,839	70,423	584	849

Integrated Neighbourhood Service

The underlying deficit has increased by £0.655m since Q2. This excludes the additional expenditure and aligned funding of £0.801m for the 2017/18 Residential and Nursing Care ceiling price increase, which came into effect during Q3.

The deficit increase of £0.655m between Q2 and Q3 is part offset by the £0.363m recurrent funding for the increase in hourly homecare rates payable, uplifted from £13.60 to £14.12 applicable for 17/18. The expenditure was within the Q2 position with the funding drawn down during Q3 from approved corporate resources.

The balance of the underlying deficit increase is offset by additional recurrent funding of £0.3m which has been aligned out of the balance of the approved investment held corporately for Adult Social Care to support National Living Wage (NLW), demand and price increases. This was aligned to Integrated Neighbourhood Services due to the continued increasing demand for Residential and Nursing Care services.

The recurrent funding illustrated above is in addition to the £1.239m non recurrent iBCF funding which is aligned to the service. This contribution continues to fund enhanced rates to secure local bed provision. In addition to this the funding supports the additional costs of increased client flow to minimise Delayed Transfers of Care (DToc), to transfer clients back into a community setting. The funding also supports a broader increase in overall demand.

The forecasted deficit in Residential & Nursing Care is due to the factors highlighted above. In addition to this is a forecasted deficit for non-residential services. This predominantly relates to the increased costs of supporting clients in a home setting.

These financial pressures are offset by a combination of the £1.239m iBCF contribution and additional income into the service above what was initially anticipated.

Boroughwide Services

The forecasts continue to reflect Intermediate Tier bed provision to budget where appropriate, as this funding is being used to support additional workforce capacity in Intermediate Tier as set out in the outline business case.

Boroughwide services includes significant staffing surpluses due to in year recruitment and staffing recharges.

Mental Health

The service received £0.229m of additional recurrent funding in Q3 into care management services which was previously held within Strategy & Performance as highlighted in the Q2 report.

The breakeven forecast position illustrated at Q3 is due to a combination of this investment highlighted above and a reduction in anticipated costs from that reported at Q2. The reduction in the costs from that reported in Q2 is partially non recurrent.

Strategy & Performance

The forecasted deficit has increased in Q3 due to the transfer of the £0.421m investment balance which was held within Strategy and Performance in Q2 for NLW, demand and price inflation. This has been allocated £0.229m to Mental Health Services and £0.192m to Learning Disabilities to part support increasing demand and part offset NLW pressures due to uplifts in external contracts.

The increased forecast deficit between Q2 and Q3 is part offset as the service secured an inflationary uplift funding of £0.147m from the 17/18 Better Care Fund allocation on the basis of the nationally mandated 1.79% uplift applied to Social Care schemes. This contribution will increase further in 18/19.

The service continues to hold the £0.558m saving requirement brought forward from 16/17. There has been a small reduction in the overtime and staff travel saving requirement of £0.03m which has been aligned to individual service areas, however the balance of £0.284m remains within the service.

The Strategy & Performance deficit is in part offset by the balance of budget available from the rebasing of staffing budgets to midpoint.

The balance of £0.2m aligned for demographics, demand and price inflation remains within Strategy & Performance and will be reviewed as part of 18/19 budget setting.

Learning Disabilities

The underlying deficit has increased by £0.479m from that reported at Q2.

However during Quarter 3 the Learning Disability service was allocated a number of recurrent investments to offset this deficit increase. These included the £0.247m balance of the approved investment into Heys Court which was brought into Adult Social Care during Q3. In addition to this was additional funding which was held within Strategy &

Performance in Q2 of £0.192m for additional NLW pressures for external contracts. A further investment has been aligned to Non Residential services of £0.206m to in part offset the increasing demand.

Due to the investments highlighted above the service is forecasting a reduced deficit outturn position from that reported at Q2.

Internal Tenancies are forecasting an overspend predominantly due to Stockport Road apartments and to a lesser extent Heys Court. This includes the additional funding aligned to Heys Court. These are part offset by surpluses within other tenancies and within operational management.

The internal tenancy service has now achieved its £1m saving target for 17/18 with the final tranche of tenancies outsourced to external provision.

The most significant financial pressure is with Non-residential services. There has been a further increase in demand including new clients transferring into supported accommodation. A further pressure remains within External Tenancies due to increasing demand.

These increasing demands are part offset by a forecasted underspend within Residential & Nursing Care and additional Continuing Healthcare income than previously anticipated at budget setting.

2.2 Earmarked Reserves

The Table below illustrates the balances in reserves carried forward into 2017/18 and anticipated in year commitments known/approved at Q3.

During Q3 a review of the approved transfers from reserves was completed to ascertain balances which were identified as uncommitted and therefore should be returned back in the appropriate reserve.

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Reserve Category	Reserve Narration	To be used for	Reserve / Approved Use Balance £000	Planned use of Reserves / "Approved Use" 2017/18 £000	Balance of Reserve / "Approved Use" £000
Directorate Reserves					
Directorate Reserve	Directorate Flexibility Reserve - People	2 ESA Advisors	21	21	0
Directorate Reserve	Directorate Flexibility Reserve - People	Additional Learning Disability transition workers	84	37	47
Corporate Reserves					
Budget Resilience Reserve	Adults Reserve	3 fte social work post to support LD tenancy outsourcing	25	25	0
Budget Resilience Reserve	Adults Reserve	Learning Disability Sleep ins; increased hourly rates	24	0	24
Strategic Priority Reserve	Health and Social Care Integration Reserve	Investment into Stockport Together Neighbourhood and Boroughwide work streams including double running of services.	2,071	1,667	404
Strategic Priority Reserve	Health and Social Care Integration Reserve	Neighbourhood work stream.	96	0	96
Strategic Priority Reserve	Health and Social Care Integration Reserve	Care Act transfer for future year commitments	139	139	0
Strategic Priority Reserve	Health and Social Care Integration Reserve	Support to Health and Social Care integration to align with Transformation Fund investment.	750	750	0
Corporate Reserve	Revenue Grant Reserve (Includes ring fenced reserves)	Locality investment into Stockport Together	2,104	2,104	0
Corporate Reserves	Revenue Grant	NESTA Co Production	42	0	42
Corporate Reserves	Revenue Grant	European Funded Schemes	149	0	149
Total			5,505	4,743	762

2.3 Portfolio Savings Programme

The Council's savings programme was agreed by the Council Meeting as part of the 2017/18 Budget on 23 February 2017. The Portfolios saving requirement for 2017/18 is £3.651m.

Proposal	Risk Rating	Value £000	Value Achieved £000	Additional Information
Learning Disability Tenancy Outsourcing	Green	1,000	1,000	This saving is now fully achieved as anticipated in the Q2 report.
Rebasing of operational staffing budgets to midpoint	Green	500	500	As per savings plan agreed with ASC
Support Service Redesign	Green	390	390	As per savings plan agreed with ASC
Commissioning and Contracts	Green	644	644	As per savings plan agreed with ASC
Unachieved saving balance from 16/17	Red	558	0	No agreed savings plan currently in place. Part of 18/19 budget proposals with £0.300m being funded recurrently and £0.258m being funded through reserves for a further year.
Staff Travel – policy review	Red	251	58	£0.030m has been aligned to services as anticipated saving in 17/18. £0.028m minor balances aligned at budget setting 17/18. Recurrent funding has been identified as part of the 2018/19 savings proposals.
Overtime - policy review	Red	91		
Superannuation advanced payment	Green	217	217	Achieved
Total		3,651	2,809	Savings still to be achieved £0.842m

Also to note for Adult Social Care is the Intermediate Care saving requirement of £1.5m which was funded non-recurrently in 2015/16 and 2016/17. It is currently illustrated that this is funded non recurrently from reserves in 2017/18 as illustrated in Section 2.2 of this report under investment into Stockport Together Neighbourhood and Boroughwide workstreams.

Adult Social Care presented a set of 18/19 budget proposals and outline business cases to Adult Social Care and Health Scrutiny committee on the 28th November for consideration. This is with regards to the savings requirements to meet the challenge of £2.528m recurrent financial pressures in 18/19 from in year balances recognised in 17/18 and the £6.745m budget saving requirement from 18/19. Further work will be required over the coming months to support the implementation of approved proposals.

Risk rating

- **Green** – good confidence (90% plus) the saving is/will be delivered or minor variances (<£0.050m) that will be contained within the portfolio.

- **Amber** – progressing at a reasonable pace, action plan being pursued may be some slippage across years and/or the final position may also be a little unclear.
- **Red** – Significant issues arising or further detailed consultation required which may be complex/ contentious

2.4. Pooled Budget

The s.75 pooled budget with Stockport CCG incorporating the Adults Social Care and Health portfolio has a Council baseline resource of £86.243m at Quarter 3. This has changed from the £84.326m reported at Quarter 2 by £1.917m. The budget increases are outlined in section 2.1.1 of this report.

The current outturn forecast as at Quarter 3 is a deficit of £0.518m. An update will be provided to the next Health & Care Integrated Commissioning Board (HCICB) on the 27th February 2018.

The total pooled budget with Stockport CCG incorporating the £86.243m discussed above continues to be circa £200m.

Portfolio	Current 2017/18 Q3 Budget £000	Forecast Outturn Q3 £000	Forecast Variance Q3 £000	Forecast Variance Reported Q2 £000
Adult Social Care	69,839	70,423	584	849
Health	16,404	16,338	(66)	(6)
Total	86,243	86,761	518	843

2.5. Capital Programme

The table below highlights the key schemes in the programme.

*Expenditure as at 31 Dec 2017 £000	Scheme	2017/18 Programme £000	2018/19 Programme £000	2019/20 Programme £000
23	Woodbank Market Garden Scheme	23	0	0
77	Case Management System	90	682	0
52	Residential Care Sector Support	103	55	0
80	Equipment Purchases	90	0	0
30	Grant allocations - remaining balance	32	961	0
262	TOTAL	338	1,698	0

2.5.1. Capital Finance Update and Outlook

Resources	2017/18 £000	2018/19 £000	2019/20 £000
Capital Grants	338	1,698	0
TOTAL	338	1,698	0

2.5.2. Programme Amendments – Rephasing

Scheme	2017/18 £000	2018/19 £000	2019/20 £000	Funding Source	Reason
Woodbank Market Garden Scheme	7	0	0	Grant	Funding Allocation from Grant Allocation
Grant allocation/other	(7)	0	0	Grant	Funding Allocation Woodbank scheme
Case Management System	0	390	0	Grant	Funding returned from E&R Portfolio re Castle Yard
Case Management System	(10)	10	0	Grant	Rephased to 2018/19
Residential Care Sector Support	3	(3)	0	Grant	Rephased from 2017/18
Equipment Purchases	32	0	0	Grant	Funding Allocation from Grant Allocation
Grant allocation/other	(32)	0	0	Grant	Funding Allocation from Equipment Purchases
Grant allocation/other	39	(39)	0	Grant	Rephased to 2017/18
TOTAL	32	358	0		

2.5.3. Progress with Individual Schemes

Woodbank Market Garden Scheme						
SMT approval	BRIEF SET	TENDER PROCESS	CONTRACTOR APPROVED	SCHEME UNDERWAY	NEARING COMPLETION	COMPLETED
<p>The Executive agreed the principle of creating a market garden scheme at the previous Woodbank Nursery site. Only minor revenue implications are envisaged as the scheme develops and matures, as the scheme would be run with volunteers and charity/trust fund payments to supplement the business income.</p> <p>In 2013/14 it was reported that a tender for the main works had been accepted which was significantly greater than the funding allocated. Grant funding of £0.138m has been awarded from NHS England from its Drug and Alcohol Recovery Programme addressing the funding requirement. A further contribution of £0.030m was received from the Parks budget as an RCCO (revenue contribution to capital outlay) to pay for the demolition costs of the original nursery buildings.</p> <p>The development of the Woodbank Arable Farm and Community Garden made excellent progress in 2015/16 and has succeeded in pulling in new stakeholders including the Stockport Food Partnership. The programme progressed well in 2016/17 and neared completion.</p>						

The remaining £0.012m allocation was intended to be spent on providing the site with access to water and electricity. The work needed to carry this out was completed in August 2017 with an additional cost of £0.004m meaning that a further allocation of £0.004m was needed from the Grant Allocations scheme in Quarter 2. However, a final capital payment of £0.007m to erect a fence and provide vehicle access means costs exceeded the allocation again by £0.007m and as such a further allocation of £0.007m from the Grant Allocations scheme has been made to cover this additional spend in Quarter 3.

Case Management System

SMT approval	BRIEF SET	TENDER PROCESS	CONTRACTOR APPROVED	SCHEME UNDERWAY	NEARING COMPLETION	COMPLETED
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The previous separate capital schemes detailed below have been consolidated into a single scheme going forward in relation to a new Adults and Children's Social Care System Procurement and implementation of £0.382m:

IT Infrastructure - £0.012m

Common Assessment Framework - £0.318m

Transforming Adult Social Care - £0.052m

In addition during Quarter 3 the allocation that had previously been granted to Economy & Regeneration towards the Arc at Castle Yard scheme was returned to the Adults Portfolio and allocated as additional funding for the Case Management System. As such the overall programme allocation is £0.772m.

In early 2016, the supplier of the Adult Social Care Case Management and Finance System (OLM, CareFirst) indicated to customers its intention to cease supporting the current system in the future. It is in the process of transitioning existing customers to its new software platform. Later in 2016, the supplier of the Children's Services system (Tribal, EIS) was sold to a new supplier (Servelec) who indicated that they did not intend to continue developing the EIS system.

Following a series of soft market testing and supplier demonstrations a decision was taken to proceed with a procurement exercise to identify a single system to meet the needs of both Children's and Adult Social Care into the future. Following the procurement process, Liquid Logic has been awarded the contract to work with Stockport Council. A single solution case management system will be implemented in the first quarter of 2019 across Stockport Family and Adult Social Care.

An Executive Steering Group has been set up as part of an overall governance structure; this is chaired by Andrew Webb and meets monthly. Initial programme set up, data migration and process mapping has started. The infrastructure is now in place and the overall timescales for implementation have been agreed. We expect to have the system live within quarter 4 of 2018/19. A detailed communications strategy has been developed to keep the workforce informed of progress and provide opportunities for their input across Stockport.

In addition to the cost of purchasing the system, costs of double running systems during a period of transition and the costs of additional human resources required to support the implementation over an 18 month period have been identified of circa £1.450m. Additional funding will be required over and above this capital allocation which will be supported from revenue within Adult Social Care and Children Services and underwritten by Council reserve funding.

It is expected that the full amount of funding within this scheme will be required to support the purchase and implementation of the new system over the next 2 years. Profiling of the expected spend is yet to be confirmed, however in anticipation of some of the costs not being incurred until 2018/19 £0.682m

has been rephased accordingly. Phasing of the expenditure will be reviewed as the scheme progresses.

Department of Health Capital Grant Allocations

SMT approval	BRIEF SET	TENDER PROCESS	CONTRACTOR APPROVED	SCHEME UNDERWAY	NEARING COMPLETION	COMPLETE D
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The Department of Health provides annual capital grants for Adult Social Care and in the period 2013/14 to 2015/16 a total of £2.866m was been allocated to Stockport.

Of this sum, £1.032m remained unallocated at the start of 2017/18.

Allocations made and carrying over to 2017/18 include:

- £0.170m was allocated to Residential Care Sector Support in 2016/17, which was to be allocated on a match funded basis. The purpose of the funding is to enhance the physical character of the living environment thus improving the experience of the individuals living there. During 2016/17 a review of the residential care capital programme took place and a programme of bidding against the funding commenced, with the emphasis being placed on technology that enhances and supports the care of individuals. Of the £0.170m, £0.012m was spent during 2016/17 with the remaining allocation of £0.158m being available for 2017/18. It is envisaged that £0.103m will be spent during 2017/18 and accordingly £0.055m has been rephased to 2018/19. There will be consideration of the remaining balance of £0.055m to direct towards any relevant capital expenditure that could meet the requirements of care home excellence that could be used as one off spend. One such scheme is the "Red Bag" scheme (at the cost of £0.010m) that will help people living in care homes receive quick and effective treatment should they need to go into hospital in an emergency, with "Red Bags" storing important information about a care home resident's health in one place, easily accessible to ambulance and hospital staff;

- £0.058m for equipment purchases to aid daily living, which is likely to have a positive impact on other areas of Adult Social Care. The 2016/17 allocation was originally £0.143m, however with £0.085m being spent in 2016/17 on the purchase of telecare equipment £0.058m remained available in 2017/18. Due to increased demand the anticipated spend in 2017/18 is £0.090m. As such additional funding £0.032m has been allocated from the Grant Allocation scheme. Work is ongoing to identify the potential requirement for funding for 2018/19 and 2019/20 with a view to allocating funding by the end of the financial year;

- £0.007m has been allocated to the Woodbank Market Garden Scheme during Quarter 3.

In Quarter 2 of 2015/16 £0.400m of grant monies was provided to Economy & Regeneration Portfolio to support the Arc at Castle Yard project. Although £0.010m was spent on this project at the early stages, the project never came to fruition and as such, as reported in Quarter 2, the remaining £0.390m has been returned to the Adults portfolio. This has been allocated against the Case Management System project.

Against the unallocated £0.993m spending on the Dementia Friendly National Pilot Programme (£0.018m), purchasing of desktop PC (£0.005m) and spending on the Integrated Team Accommodation works at Baker Street (£0.007m) has taken place during the current financial year.

As such £0.963 effectively remains unallocated at the end of Quarter 3 of 2017/18.

Profiling of the £0.963m will be regularly reviewed and updated as allocations are made.

Mandatory Disabled Facilities Grants (DFG)						
SMT approval	BRIEF SET	TENDER PROCESS	CONTRACTOR APPROVED	SCHEME UNDERWAY	NEARING COMPLETION	COMPLETED
<p>The Disabled Facilities Grant resides within the Communities & Housing Portfolio. The latest update on this scheme is provided below.</p> <p>In late November, Government announced provision of an additional £42m nationally for mandatory DFG work in 2017/18, as part of the Autumn budget round. For Stockport this represents an offer of an extra £0.213m on top of the indicative mandatory DFG budget which was set locally in April at £1.373m out of the £2.169m grant allocation received in 2017/18. The offer has been accepted and discussions are now ongoing at senior officer level across Strategic Housing, Adult Social Care and Stockport Homes to identify innovative and effective ways to commit this funding to projects that fit the purposes for mandatory DFG. These discussions are running in tandem with work that was already in hand to look at how the Better Care Fund can be used more innovatively to support the wider principles of prevention.</p> <p>For grant applicants who choose to employ the Home Improvement Agency to project manage the installation of their adaptations, the procurement of all major adaptations is now via framework provision, save for very exceptional cases requiring specialist equipment. The current framework for the supply and installation of lifts and hoists has been in place since March 2016 and is working very efficiently. The framework for provision of bathing needs and general adaptations has been in place for nearly four months and is bedding in well.</p> <p>As at the end of November, 332 recommendations for major adaptations had been received for disabled people of all ages during 2017/18. This is a significant increase when compared to the same period in previous years (285 referrals in 2016/17, 184 referrals in 2015/16 and 225 referrals in 2014/15). Whilst demand will fluctuate over the year there does appear to be a steady growth in demand, particularly in the over 75 year age group.</p> <p>As at the end of November 107 cases had completed.</p> <p>At the end of November the value of payments made to contractors totaled £0.500m. Behind this, the value of grants formally committed but not yet paid together with the estimated value of cases in the grant application process (adjusted to account for cases that will not progress to grant approval) was £0.886m. At this point in the year it is realistic to expect that these cases will reach completion during the financial year, putting the total value of adaptations work likely to be a call on the DFG fund at the end of Quarter 3 at approximately £1.386m. This could increase depending on the demand for service over the next two months, and officer and contractor capacity to respond to the demand.</p> <p>With the forecast spend standing at £1.386m, £0.783m remains available from the 2017/18 grant allocation of £2.169m, in addition to the £1.161m surplus brought forward from 2016/17. As such £1.944m is available towards additional DFG/Adult Social Care priorities that require capital expenditure.</p> <p>The DFG allocation for 2018/19 has already been announced and Stockport's allocation stands at £2.357m.</p>						