

# Scrutiny for Policies, Adults and Health Committee

Wednesday 13 March 2019  
10.00 am Taunton Library Meeting Team



To: The Members of the Scrutiny for Policies, Adults and Health Committee

Cllr H Prior-Sankey (Chair), Cllr M Healey (Vice-Chair), Cllr P Clayton, Cllr M Caswell, Cllr A Govier, Cllr B Revans, Cllr A Bown and Cllr G Verdon

All Somerset County Council Members are invited to attend meetings of the Cabinet and Scrutiny Committees.

Issued By Scott Wooldridge, Strategic Manager - Governance and Risk - 5 March 2019

For further information about the meeting, please contact Jennie Murphy on 01823 357628, [JZMurphy@somerset.gov.uk](mailto:JZMurphy@somerset.gov.uk) or Or Lindsey Tawse on 01823 355059, [LTawse@somerset.gov.uk](mailto:LTawse@somerset.gov.uk)

Guidance about procedures at the meeting follows the printed agenda.

This meeting will be open to the public and press, subject to the passing of any resolution under Section 100A (4) of the Local Government Act 1972.

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# AGENDA

Item Scrutiny for Policies, Adults and Health Committee - 10.00 am Wednesday 13 March 2019

**\*\* Public Guidance notes contained in agenda annexe \*\***

**1 Apologies for Absence**

- to receive Member's apologies.

**2 Declarations of Interest**

Details of all Members' interests in District, Town and Parish Councils will be displayed in the meeting room. The Statutory Register of Member's Interests can be inspected via the Community Governance team.

**3 Minutes from the previous meeting held on 30 January 2019 (Pages 5 - 10)**

The Committee is asked to confirm the minutes are accurate.

**4 Public Question Time**

The Chairman will allow members of the public to ask a question or make a statement about any matter on the agenda for this meeting. **These questions may be taken during the meeting, when the relevant agenda item is considered, at the Chairman's discretion.**

**5 Somerset CCG Quality Performance Report (Pages 11 - 18)**

To receive the performance report.

**6 Performance Report Adults and Social Care (Pages 19 - 24)**

To receive the Performance report.

**7 Discovery - Scrutiny Update (Pages 25 - 46)**

To receive the Performance report

**8 Scrutiny for Policies, Adults and Health Committee Work Programme (Pages 47 - 60)**

To receive an update from the Governance Manager, Scrutiny and discuss any items for the work programme. To assist the discussion, attached are:

- The Committee's work programme
- The Cabinet's forward plan

**9 Any other urgent items of business**

The Chairman may raise any items of urgent business.

## Guidance notes for the meeting

### 1. Inspection of Papers

Any person wishing to inspect Minutes, reports, or the background papers for any item on the Agenda should contact the Committee Administrator for the meeting – Jennie Murphy 01823 359500 ; 01823 355529 or

Email: [jzmurphy@somerset.gov.uk](mailto:jzmurphy@somerset.gov.uk) They can also be accessed via the council's website on [www.somerset.gov.uk/agendasandpapers](http://www.somerset.gov.uk/agendasandpapers)

### 2. Members' Code of Conduct requirements

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed at: <http://www.somerset.gov.uk/organisation/key-documents/the-councils-constitution/>

### 3. Minutes of the Meeting

Details of the issues discussed and recommendations made at the meeting will be set out in the Minutes, which the Committee will be asked to approve as a correct record at its next meeting.

### 4. Public Question Time

**If you wish to speak, please tell Jennie Murphy, the Committee's Administrator, by 15pm 3 clear working days before the meeting (5pm Thursday 07 March 2019).**

At the Chair's invitation you may ask questions and/or make statements or comments about any matter on the Committee's agenda – providing you have given the required notice. You may also present a petition on any matter within the Committee's remit. The length of public question time will be no more than 30 minutes in total.

A slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been signed. However, questions or statements about any matter on the Agenda for this meeting may be taken at the time when each matter is considered.

You must direct your questions and comments through the Chair. You may not take a direct part in the debate. The Chair will decide when public participation is to finish.

If there are many people present at the meeting for one particular item, the Chair may adjourn the meeting to allow views to be expressed more freely. If an item on the Agenda is contentious, with a large number of people attending the meeting, a representative should be nominated to present the views of a group.

An issue will not be deferred just because you cannot be present for the meeting. Remember that the amount of time you speak will be restricted, normally to two minutes only.

**5. Exclusion of Press & Public**

If when considering an item on the Agenda, the Committee may consider it appropriate to pass a resolution under Section 100A (4) Schedule 12A of the Local Government Act 1972 that the press and public be excluded from the meeting on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, as defined under the terms of the Act.

**6. Committee Rooms & Council Chamber and hearing aid users**

To assist hearing aid users the Committee meeting rooms have infra-red audio transmission systems.

**7. Recording of meetings**

The Council supports the principles of openness and transparency. It allows filming, recording and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings and a designated area will be provided for anyone wishing to film part or all of the proceedings. No filming or recording may take place when the press and public are excluded for that part of the meeting. As a matter of courtesy to the public, anyone wishing to film or record proceedings is asked to provide reasonable notice to the Committee Administrator so that the relevant Chair can inform those present at the start of the meeting.

We would ask that, as far as possible, members of the public aren't filmed unless they are playing an active role such as speaking within a meeting and there may be occasions when speaking members of the public request not to be filmed.

The Council will be undertaking audio recording of some of its meetings in County Hall as part of its investigation into a business case for the recording and potential webcasting of meetings in the future.

A copy of the Council's Recording of Meetings Protocol should be on display at the meeting for inspection, alternatively contact the Committee Administrator for the meeting in advance.

## SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE

Minutes of a Meeting of the Scrutiny for Policies, Adults and Health Committee held in the Library Meeting Room, Library, Paul Street, Taunton, TA1 3XZ, on Wednesday 30 January 2019 at 10.00 am

**Present:** Cllr H Prior-Sankey (Chair), Cllr M Healey (Vice-Chair), Cllr P Clayton, Cllr M Caswell, Cllr A Govier, Cllr B Revans, Cllr A Bown and Cllr G Verdon

**Other Members present:** Cllr M Chilcott, Cllr S Coles, Cllr G Frascini, Cllr L Leyshon, Cllr D Huxtable and Cllr T Munt

### Apologies for absence:

#### 152 **Declarations of Interest** - Agenda Item 2

There were no declarations.

#### 153 **Minutes from the previous meeting held on 05 December 2018** - Agenda Item 3

The minutes were agreed and signed by the Chair.

#### 154 **Public Question Time** - Agenda Item 4

There were no public questions.

#### 155 **Nursing Home Support Service** - Agenda Item 5

The Committee considered a report outlining the Nursing Home Support Service (NHSS). This Service is a joint NHS Somerset CCG and Somerset County Council initiative. The aim is to support local nursing homes with improving quality, raising standards and reducing avoidable hospital admissions.

The presentation was an opportunity for the Committee to understand the vision for its future to better support the delivery of strategic ambitions across key agencies.

The latest assessment for the Care Quality Commission (CQC) gave a rating of Good or Outstanding rating to 91% of Nursing Homes providers in Somerset and none were recorded as being Inadequate. This compares very positively with the national average of 74%.

The NHSS have several areas where they believe they are a catalyst for improvement. They offer the following: -

1. Learning Engagement Meetings – to offer the training and support to Nursing Homes to reduce the number of acute hospital admission,
2. Enhanced Skills and Knowledge - support by a Registered Nurse to improve clinical skills, introduce new tool like NEW2 (an early observation tool to identify changes in clinical presentation,
3. St Margaret's Hospice Project – to design and pilot nursing home end of life training and palliative care,
4. Training and Development – covering areas like tissue viability and observation training,

5. Somerset Treatment Escalation Plan (STEP) – to respect individuals wishes and avoid hospital admission
6. Red Bag Scheme – A simple arrangement on discharge to make sure safer and more collaborative discharge scheme,
7. Tissue Viability - An enhanced tissue viability service to be implemented later this month,
8. Sundown Project – a CQC initiative that will provide weekly real-time bed tracker to assist with providing an overview of nursing provision in Somerset,
9. Quality Concerns – the service provides an information sharing to feed into the quality assurance and safeguarding function,
10. Newsletter – a bi-monthly newsletter providing updates on clinical skills and aiding communication between providers,
11. Mapping of Community Services – NHSS is looking to map all health related to potentially identify any gaps and
12. Proud to Care in Somerset – part of a South West drive to promote care as a career option to address the current challenge in recruitment and retention of care staff.

The Committee welcomed the positive contribution the NHSS was making in Somerset. The Committee agreed that it was evident that there was no room for poor quality care and being in the top 10 Nationally for high quality was to be saluted.

The name of the bed tracking project was considered insensitive and there was a request that this be fed back to the independent organisation operating it. The Committee was keen to be assured that tissue viability was a mandatory part of training for all staff employed by providers. It was confirmed it was.

The Committee congratulated the NHSS on progress to date and asked for an update in 12 months' time.

#### 156 **Fair Cost of Care** - Agenda Item 6

The Committee were given an update on an exercise to ensure the fee levels for 2018/19 that were commissioned by Somerset County Council reflect the actual cost of care in the local market. The exercise was conducted by an organisation who are qualified to carry out the exercise and are independent of the local authority. The report they produced informed the decision to offer an increased rate for both Care at Home and for enablement. The Committee were also informed that there was an oversupply of care home beds in Somerset and this was despite some care homes closing in 2018. The Committee were pleased to be given the reassurance that despite there being over 700 free beds in care homes across the county the authority was working with providers to divert resources into other areas of demand.

While these costs have been agreed for this financial year there was a concern about next year as budgets had yet to be approved and the promised Green Paper from Government has been delayed by 8 months already and without a decision about the ongoing funding for Adult Social Care it was difficult to plan. The Committee discussed the report and asked to assurance that the increase in hourly rate was passed on to employees and that proper travel time was paid to individuals when they were working in the more rural parts of the county. The Committee were pleased to hear of the high quality and effective the service

was maintained despite the significant cut on the budget over the last three years however, they were concerned that this level of service could not be sustained if further reduction in budgets was expected.

The Committee noted that the fees had been agreed for the next year only and to continue to drive the high quality of the service some stability was required. The Committee wanted to ensure these increases were passed onto micro-providers in addition to the main suppliers. They were informed that personal budgets had to be individually approved and they would not be if the hourly rate and service provided was not consistent with the fee structure agreed by the Council.

#### 157 **Medium Term Financial Plan - Agenda Item 7**

The Committee considered a report on the Medium Term Financial Plan (MTFP). The report summarised the report presented to Cabinet in December 2018. This report had been tailored for Scrutiny have sight of the detail going to Cabinet and Full Council in February 2019. This report lays the foundation for the financial plans for 2020/21 and 2021/22.

The Committee noted the report and discussed the high-level detail. Discussion included:-

Questions around the predicted increase in people with learning difficulties yet the number of old people is predicted to be stable. This was because more people with learning difficulties now reach adulthood and Somerset is currently the 3<sup>rd</sup> highest in the country for providing funding for adults with learning difficulties. Transformation of the service has enabled the service to continue to deliver a quality service in a different way.

The Committee noted that a further spending review is due in 2019 and direct representation and through the LGA was going to be made to ask for a long-term funding solution. Mid-year and mid-cycle grants; although welcome, did not assist in long term planning.

The Committee voted to make a Recommendation to Cabinet: -

Councillor M Healey proposed the following recommendation: -

The Scrutiny for Policies, Adults & Health Committee recommends that the Cabinet, in partnership with other stakeholders including Group Leaders and Somerset MP's, takes a leading role in proactively lobbying central government about the urgent need for sustainable long-term funding for adult social care in Somerset.

This was seconded by Councillor B Revans and carried unanimously following a vote.

The Committee then looked at each element of the paper in detail as contained in the summary paper: -

1, Rationalisation of Extra Care Housing provision in Somerset – There has been a review of Extra Care schemes and three have been decommissioned and a further 8 of the 22 remaining schemes do not provide good value for money and will continue to deliver a general needs housing or specialist

sheltered housing. The Committee asked to be informed confidentially of the 8 schemes set to be altered. It was confirmed that appropriate consultation and discussions would take place prior to the change.

2, Review of Care Packages – 6,832 people living in Somerset receive funded support. Under the Supporting Independence strategy over 5,000 people have had a review under the same framework as would be used for a new assessment. Of the 5,000 about 500 had a change, 150 had an increase in support. This review resulted in a saving of £3 million. The Committee welcomed such reviews and stressed the importance of carrying out regular reviews to make sure that appropriate support was being delivered and the funding came from the correct source.

3, KeyRing Grant Reduction – This is a network providing a variety of housing related support for clients. The network in Glastonbury/Street is going to be removed as the necessary support is now available in the local community. The Committee were concerned about the community living down on the levels but were assured this was not the area where KeyRing had been operating.

4, Recommissioning Care Home Dementia Support – The proposal is to review existing high cost complex mental health cases who have complex dementia to ensure the most appropriate care is being provided to each individual. Currently there are a number of individuals who receive 1 to 1 support and it is not clear that this is the best way to support this complex illness.

The discussion included the use of shared best practice from neighbouring counties. The use of micro-providers and supporting them to be the best. The challenges of supporting families as well as individuals when dementia is diagnosed. The use of village agents to support and the fact that there are families who do not seek support until the family has reached crisis.

5, Managing Demand/Reduction in placements in residential nursing Care – The strategy here is to promote independence by using village agents to work in local communities. This direct approach reduces the need for individual funded support and is quicker, more creative and more responsive. The Committee discussed this and agreed that to sustain the considerable savings and more effective delivery of services it was important to have a clear idea of funds for the next three years at the outset.

The Committee discussed the 700 Care Bed availability to be sure there was a plan to support providers and to use the capacity in a different way. It did not make sense to have such unused capacity in the long term. The Committee were interested to know how closely the authority worked with self-funded placements. In the past there used to be minimal contact but the Care Act 2014 required better communication, and this has started.

6, Reduction of Independent Assessor support in the deprivation of Liberty safeguards service – This service is currently delivered by a mix of internal and external assessors. To deliver the required savings it is proposed that the majority of these assessments it has been decided to do all of these in-house. The Committee were concerned to note that by doing this the level of risk increased. It was explained that with all the cases coming in-house the spread was reduced.



After discussing all the items individually, the Committee came to the agreement that the high level of achievement and ratings of all the services in Somerset was to be commended however, the need for a commitment to a long-term funding arrangement that reflected the demand and cost of these services was vital. The this end they agreed another Recommendation to Cabinet as follows: -

Councillor B Revans proposed the following recommendation: -,

The Scrutiny for Policies, Adults & Health Committee wishes the Cabinet to be aware of the future risk to adult social care funding, particularly the future capacity to deliver further savings and the impact this will have on preventative services.

This was seconded by Councillor M Healey and carried unanimously following a vote.

**158 Scrutiny for Policies, Adults and Health Committee Work Programme - Agenda Item 8**

The Committee considered and noted the Council's Forward Plan of proposed key decisions in forthcoming months including Cabinet meetings up to date. It was agreed that as the Somerset Partnership had been inspected and given a rating of Good it was not necessary to have an update again.

Similarly, there was no need for a further update on Community Hospitals. The next meeting will be 13 March and will focus on Performance – due to the anticipated number of attendees the meeting will be held in Shire Hall.

The Committee added a request from an update on NHSS in 12 months' time.

**159 Any other urgent items of business - Agenda Item 9**

There were no other items of business.

**(The meeting ended at 1.00 pm)**

**CHAIRMAN**

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## **Integrated Quality, Safety and Performance**

**Lead Officer:** Sandra Corry Director of Quality and Nursing and Alison Henley Director of Finance, Performance and Contracting.

**Author:** Deborah Rigby Deputy Director Quality and Safety NHS Somerset CCG and Michelle Skillings Head of Performance Somerset CCG

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### **1. Summary**

- 1.1.** This paper provides an update on the Somerset CCG Integrated Quality, Safety and Performance. The CCG has established performance monitoring meeting with all providers of healthcare services, this paper gives a summary of the escalation issues for quality, safety and performance against the constitutional and other standards for the period 1 August 2018 to 30 November 2018.

It is important to recognise this report provides a summary by exception which generally highlights areas where the performance is not as good as we would want it to be. This should not detract for all the excellent work in Somerset by health services which are not mentioned.

- 1.2.** In 2018/19 the demand for both elective and emergency services in Somerset continues to increase compared to the previous year. This has led to increased waiting times particularly for diagnostics and elective treatment. The CCG and Health providers have identified particular areas of pressure and these are monitored with support from the Somerset Referral Management centre to offer alternative choice to individuals. The increase in people who have long waits continues to be a concern against the national target of zero, the numbers are however very small (less than 60) and all individuals awaiting treatment are regularly assessed against potential harm arising from a wait and urgent cases are prioritised.
- 1.3.** The overall Somerset position with regards to the Care Quality Commission (CQC) ratings in the Safety Domain remains challenged, with all Trusts in Somerset rated as Requires Improvement. The CCG has undertaken an analysis constructed by presenting CQC findings and each individual Trusts' consequential action plan, using a high level summarised descriptors of the CQC lines of enquiry under the safe domain and will continue to work closely with all commissioned services to deliver an improved position. The key lines of enquiry will include: Safeguarding and protection from abuse, Managing risks, Safe care and treatment, Medicines management, security of records, mandatory training, recruitment checks, Track record and Learning when things go wrong.
- 1.4.** On the 16 August the results from the 2018 Patient-Led Assessments of the Care Environment (PLACE) Programme were published. At a national level, PLACE scores have slightly improved since 2017 for all domains. The largest increases were seen for the dementia (up 2.2 percentage points) and disability (up 1.6 percentage points) domains. These increases may reflect increased investment in and understanding of these newer PLACE domains (dementia was introduced in 2015 and disability in 2016).

- 1.5. All three Somerset Trusts have seen an increase in privacy, dignity and wellbeing scores. Taunton and Somerset NHS Foundation Trust (TST) has seen a 10.1% increase in its score for dementia care. All the Trusts have seen a decrease in cleanliness scores. The combined score for food for TST and Yeovil District Hospital NHS Foundation Trust (YDH) have shown a slight decrease in scores in 2018. All providers are developing improvement plans based on this feedback. The CCG through its routine monitoring and assurance process will continue to oversee improvements.
- 1.6. There have been significant challenges over the last month with Nursing Home providers and the closure of two Care homes in Somerset. The CCG and Local Authority have worked together and have supported the transfer of all individuals placed in these homes and supported the care staff. From 3 December 2018 the CCG have a Care Home Tracker Bed Status System which will monitor initial weekly available beds in the systems and from April 2019 will also include quality markers. This will help support improved discharge process across Somerset.
- 1.7. On 19 November 2018 the CCG took part in a Regional workshop on delayed discharge from acute inpatient paediatric care, it is a very challenging area that faces our health and care services, the event was seen as a spring board for the health Sustainability and Transformation Partnerships (STP's) to take forward and build on sustainable solutions. Somerset System has actively come together led by the CCG to identify a range of immediate improvements and longer term goals these include: a joint protocol for management of complex children involving a commitment to do a rapid joint assessment from health and social care. In addition, a designated space in A&E to enable privacy during this assessment. The CCG has also increased the investment in Psychiatric liaison in A&E.

## 2. Areas to celebrate

- a) NHS Staff Survey: TST in highest 20% of Trust's nationally with positive staff response
- b) CCG Safeguarding Children Strategy and Dashboard now complete
- c) Home First quality metrics and contract specification in place with the Trusts

## 3. Challenges

- a) Workforce: recruitment, turnover and vacancy rate challenges throughout all providers remains a significant area of focus for Somerset
- b) SWAST remain outside the national average for 14 out of 17 Ambulance Quality Indicators
- c) CAMHS and CLA on inpatient children's wards remain ongoing areas of challenge which the system partners are actively addressing together
- d) Increase in number of pressure ulcers category 2 and above noted at TST, RUH and Sompar
- e) Long waits for treatment and clinical risk of deterioration

## 4. CCG local quality & safety priorities

- a) Increase in Call Stack at SWAST during periods of high demand has the potential to adversely affect patient safety. SWAST Incident Stacking risk escalated to Single Item Quality Surveillance Group an agreed improvement plan is in place to mitigate risk
- b) Discharge summary letters includes timely, within 24 hours and accurate information
- c) E coli infections over trajectory - 10% reduction in all E coli Blood Stream Infection (BSIs) through focused review of repeat infection cases, hydration and urinary catheter campaign in place.

- d) Safeguarding Children and Adult training compliance continues to be kept under review

## 5. Quality & Performance Improvement Priorities

- a) Development of quality metrics within urgent care including Minor Injury Units (MIU)
- b) Improving the quality and effectiveness of the Ward Round to enhance effective discharge planning and individual information
- c) Focus upon suicide prevention through system working approach with independent facilitation Terms of Reference being scoped
- d) Learning from serious Incidents and Improvements as an outcome linked to Health Service Investigation Branch (HSIB) reports
- e) National Early Warning Scores version 2 (NEWS2) in Care Homes Primary Care and Somerset Trusts
- f) Development of a joint CCG and Local Authority focused service review of LD service to inform future strategic planning and commissioning

## 6. Issues for consideration/Recommendations

Scrutiny Committee are asked to note this paper as assurance of the health Performance reviews.

### 6.1. The key area of focus include:

#### Hospital Care

- a) Invasive Group A Streptococcal (iGAS) outbreak November 2018
- b) Escherichia coli incidence remains over trajectory to achieve the 10% reduction, with a total of 355 cases against a trajectory of 264
- c) Clostridium Difficile - Somerset system is below the national target which is good, MPH currently above target
- d) National target by 31 December 2018 all Discharge Letters to be sent electronically within 24 hours
- e) Falls prevention and support, During the cumulative period April to November 2018 there has been a 9.5% increase in the number of patients aged over 65 years who were admitted to hospital after sustaining an injury from a fall with a high proportion of this increase relating to patients aged over 75 years who were categorised as having had a 'other falls on the same level' or 'unspecified falls' resulting in injuries to the scalp and head, fracture of the neck of femur and other closed fractures. Both TST and YDH are promoting patient education and an Integrated Falls Service; there is a 'soft launch' taking place throughout December with a full launch due to commence in January which will provide a dedicated falls service for patients over 65 at risk of falls and those who have low acuity fall injuries. In addition, Somerset CCG is working with the Centre For Better Ageing (Manchester University) and Somerset Public Health who held a Stakeholder Day on 27 September 2018 to discuss the services provided for people who fall in the community focusing specifically on increasing the uptake and provision of community based strength and balance exercise programmes.
- f) Deprivation of Liberty Safeguards (DoLS) and Court of Protection Risks: The financial costs associated with Court of Protection cases present a risk to the CCG. There were currently five active cases. There is a Bill currently going

through parliament to replace the DoLS scheme. This will have a significant impact on hospital providers who will be required to undertake their own assessments to authorise the Deprivation of Liberty. There will also be an impact on Somerset CCG as CCGs will be required to authorise any Continuing Health Care (CHC) funded people who are deprived of their liberty.

- g) **Care Homes:** 91% of care homes with nursing inspected in Somerset are rated as 'good' or better. There are currently no care home services in Somerset CCG area rated 'inadequate'. There is a risk to the CCG that individuals with complex needs are being placed in the Somerset CCG area by other Local Authorities and CCGs, without the knowledge of Somerset CCG. This places increased requirements on commissioned services. It also presents a risk to the individual who may be placed inappropriately and without access to the health services to support their complex needs.

## 6.2. NHS 111

- a) Despite improvements seen since May 2018, NHS 111 performance for Calls Answered within 60 seconds is still a concern, with performance in November 2018 achieving 72.02% against a target of 95%, which is a reduction compared to the previous month. Performance is expected to improve from December 2018 with the implementation of the interim arrangements to provide resilience over the winter period, it has been agreed that Vocare will support 50% of the calls, with Devon Doctors (including a sub-contract with Care UK) providing support for the other 50%.
- b) The percentage of calls directed to Ambulance Dispatch has varied considerably. However, during October and November 2018 the number of calls being directed to Ambulance Dispatch has increased to 10.93% and 12.99% respectively, against a target of below 10%.

## 6.3. Ambulance

- a) Performance for Category 1 999 ambulance calls has been gradually improving since March 2018, when the whole urgent care system saw an increase in demand. During November 2018, Category 1 mean performance met the target for the first time since the new Ambulance Response Performance (ARP) measures were introduced in November 2017 at 7 minutes target. Category 1 90th Percentile performance was also within target at 13.9 minutes against a 15 minute target, which is the best observed performance for 90th Percentile since the introduction of the new ARP measures in November 2017.
- b) Category 2 performance continues to be an area of challenge and increasing concern within Somerset and across the South Western Ambulance Service NHS Foundation Trust (SWASFT) patch.
- c) A Joint Improvement Plan between SWASFT and all South West regional commissioners, led by Dorset as Lead Commissioner, is being developed to address areas of concern and improve performance.

## 6.4. Emergency Demand and Performance

- a) The Somerset system has experienced a 5.5% increase in the number of people attending an A&E Department and a 5.6% increase in emergency admissions when comparing April to November 2018 to the same period in the previous year (which equates to 7,912 additional A&E attendances 1,389 additional admissions) with all local Providers experiencing an increase in demand
- b) YDH continue to be one of the top performers nationally in respect of A&E 4 Hour performance and TST remain behind their improvement plan
- c) Periods of high demand continue to impact on the Trust's services including

delays in responses and the need to routinely manage call stacks. SWASFT and Somerset CCG increased its risk relating to Incident Stacking (A&E) to 25 in March 2018 and this level of risk continues (as noted at Trust November 2018 Board). This risk notes that stacking of Cat2, Cat3 and Cat4 calls due to the availability of resources and / or high demand could adversely impact patient safety, patient experience staff morale and performance.

- d) The CCG has completed a comprehensive Quality Equality Impact Assessment (QEIA) for the Somerset response to issues associated with call stacking (and risk score accordingly). This was shared with Dorset CCG (as Co-ordinating Commissioner) on 20 December 2018.
- e) One of the mitigation actions noted in response to the incident stacking (999) risk is implementation of a revised Standard Operating Procedure (SoP) for welfare calls.

## **6.5. Elective Demand and Performance**

- a) The Somerset system has experienced a 2.4% increase in Referrals when comparing April to November 2018 to the same period in the previous year underpinning this is a 16.7% increase in suspected cancer referrals, an increase in cancer referrals received via a Screening Service and an increase in referrals as a result of an emergency presentation.
- b) Somerset Clinical Commissioning Group has not met the local Referral To treatment (RTT) incomplete pathway objective since July and performance in November was 83.9% against a plan of 85.5%; there were 6,382 patients waiting over 18 weeks (which is an increase of 187 long wait pathways following a reduction in October) and a median (completed treatment) waiting time of 33.6 weeks. As a consequence of the increase in cancer demand and comparable increase in the number of positive cancer diagnoses there is an impact upon the waiting times profile due to these patients taking priority and displacing routine activity. Entry FP93 on the CCG Corporate Risk Register includes a score of 20 in respect of meeting the waiting times target for RTT.
- c) There were 45 patients waiting more than a year in November 2018 against an original plan of 7 and this represents a reduction of 8 patients upon the previous month. Of the 45 long waits reported, 40 patients were reported by TST and 5 patients reported by Other Providers (North Bristol NHS Trust and (3), Royal Devon and Exeter NHS Foundation Trust and Oxford University Hospitals NHS Foundation Trust (1).

## **6.6. Diagnostic 6 Week Waits**

- a) Somerset CCG has continued to not meet the waiting time standard whereby patients can expect to receive their diagnostic test or procedure within 6 weeks, as a consequence of the under-performance predominantly at TST. There is insufficient capacity to meet recurrent demand and workforce resilience. Performance in November 2018 was 88.64% against a planned level of 94.94% and the 99% operational standard. The diagnostic modalities having the most significant impact upon delivery of the standard are MRI, Echocardiography and Endoscopy (Gastroscopy, Colonoscopy and Flexi Sigmoidoscopy). Entry FP99 on the CCG Corporate Risk Register includes a score of 20 in respect of meeting the waiting times target for diagnostics. TST have an improvement plan in place which anticipates performance will improve to 92.5% by March 2019; however the Echocardiography in-sourced Provider has not been able to deliver the level of tests outlined within the plan and in January 2019 withdrew services from the Trust. To address this shortfall, the Trust secured additional Locum capacity and have identified a further in-sourcing Provider to support backlog clearance.
- b) The Elective Care Delivery Board has established a Diagnostic Working Group; with representation from the CCG, TST and YDH and the focus of this Group is

upon the most challenged modalities of MRI, Echocardiography and Endoscopy and the key aims and objectives are to standardise access to Diagnostics across Somerset, establish mechanisms to manage routine and urgent demand, gain a consistent understanding of demand, capacity and growth or this to feed into future planning assumptions and reduce waiting times and equalise waits across Somerset

#### **6.7. Cancer**

- a) Across the Somerset System there has been an increase in Suspected Cancer 2 Week Waits, comparing April to November 2018 to the same period the previous year, there has been a 16.9% increase in demand (which equates to 2122 additional referrals). However, despite this increase in demand, Somerset CCG achieved the 93% target with performance of 93.8%
- b) Somerset CCG 62-Day performance in November was 84.41% and achieved the revised plan of 78.88%, and has been achieved by an increase in diagnostic capacity and delivery of cancer improvement plan actions with YDH demonstrating the greatest scale of improvement in November
- c) There continue to be significant pressures on clinical services including respiratory, oncology, and urology. This is due to challenges recruiting to specialist posts and staff attrition and retirement

#### **6.8. Dementia Assessment, Screening and Referral**

- a) Providers of NHS funded acute care are required to return data on the number and proportion of patients aged 75 years and over admitted as an emergency for more than 72 hours who have been identified as potentially having dementia, are appropriately assessed and are referred onto specialist services
- b) Both local acute providers submit this data routinely and are performing well, trust performance for the Dementia Assessment and Referral data collection as described above is as follows;
- c) TST - during October 2018 (latest available data) of those patients who answered positively for case finding, 100% received a diagnostic assessment. Of those patients with a positive or inconclusive diagnostic assessment, 100% of cases were referred onto specialist services
- d) YDH - during October 2018 (latest available data) of those patients who answered positively for case finding, 100% received a diagnostic assessment. Of those patients with a positive or inconclusive diagnostic assessment, 100% of cases were referred onto specialist services

#### **6.9. Improving Access to Psychological Therapies / Talking Therapies service**

- a) The Improving Access to Psychological Therapies (IAPT) programme began in 2008 and has transformed treatment of adult anxiety disorders and depression in England. The latest IAPT access rate (un-validated) performance for November 2018 shows that Somerset has delivered performance of 18.72%, against CCG trajectory of 15% (annual trajectory of 15.5%, increasing to 19% national ambition in 2019/20) and this is an improvement on the October reported position of 15.41%. It was anticipated that staff training would negatively impact access rate performance in September and October 2018 however this has not been evident, although moving forward both trainee cohorts are undertaking their training at the same time and it is anticipated that this will negatively impact access rate performance from December 2018. Somerset Partnership NHS Foundation Trust are recruiting agency staff to help mitigate this risk. A related entry (reference CCD65) on the CCG Corporate Risk Register includes a score of 15 in respect of IAPT counselling, the progress as detailed here helps mitigate this risk



- b) Subsequent to the last integrated report, and following a review undertaken by the Intensive Support Team earlier in the year, a change in IAPT counting methodology has been jointly agreed between NHS England and NHS Improvement which will lead to a decline in access rates of approximately 4%-5%. The revised reporting arrangements will come into force from April 2019.

#### **6.10. Child and Adolescent Mental Health Services**

- a) National guidance states that one in ten children have a diagnosable mental health disorder, this can range from short spells of depression or anxiety through to severe and persistent conditions that can isolate, disrupt and frighten those who experience them
- b) The Mental Health (MH) Five Year Forward View sets out the ambition that by 2020/21 at least 35% of Children and Young People (CYP) with a diagnosable MH condition will receive treatment from an NHS-funded community MH service. This measure seeks to count CYP who have accessed NHS-funded community MH service for treatment, against an estimated prevalence of CYP with a diagnosable condition.
- c) Un-validated CYP MH access rate data provided by Somerset Partnership shows cumulative performance to November of 22.7%, against the CCG ambition of 32% and Quality Premium stretch target of 34%
- d) Not all activity is reported, for example Kooth activity to date appears better than anticipated. The CCG is currently in discussion with Kooth regarding commissioning additional online activity during Quarter 4 (to be funded by NHS England (NHSE) waiting-list monies), with the intention of closing the gap against the national ambition as far as possible
- e) NHSE is exploring the possibility of a “late catch-up” exercise in 2019 to permit previously unreported activity to be submitted for inclusion

Full NHS Somerset CCG Quality and Performance report including dashboard is available on: <https://www.somersetccg.nhs.uk/about-us/governing-body/meetings-and-papers/gb-31-january-2019/> Performance, Quality and Safety Exception Report (ENC H)

## **7. NHS 10 Year Plan**

**7.1** On the 9 January 2019 the NHS Long Term Plan was published, focused on building an NHS fit for the future by:

- a) enabling everyone to get the best start in life
- b) helping communities to live well
- c) helping people to age well

**7.2** The plan includes additional measures to:

- a) improve out-of-hospital care, supporting primary medical and community health services
- b) ensure all children get the best start in life by continuing to improve maternity safety including halving the number of stillbirths, maternal and neonatal deaths and serious brain injury by 2025
- c) support older people through more personalised care and stronger community and primary care services
- d) make digital health services a mainstream part of the NHS, so that in 5 years, patients in England will be able to access a digital GP offer

**7.3** There is a welcome focus to continue to identify and support carers, particularly those from vulnerable communities. Carers are twice as likely to suffer from poor health compared to the general population, primarily due to a lack of information and support, finance concerns, stress and social isolation. Quality marks for carer-friendly GP practices, developed with the Care Quality Commission.

**7.4** A National implementation framework is to be published in Spring 2019. Local health systems are to receive five-year indicative financial allocations for 2019/20 to 2023/24 and be asked to produce local plans for implementing the commitments set out in the Long Term Plan in 2019. Integrated Care systems are critical to implementation of the Plan, and are proposed will be in place nationally by April 2021.

Somerset County Council  
Scrutiny for Policies, Adults and Health  
Committee  
– 13 March 2019

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## Adult Social Care Performance Update

Lead Officer: Stephen Chandler, Director of Adult Social Services

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Cabinet Member: David Huxtable, Cabinet Member for Adult Social Care

Division and Local Member: All

### 1. Summary

- 1.1. This report seeks to serve as an annual update outlining key performance achievements and developments within Adult Social Care over the last 12 months, as well as capturing those areas where continued efforts and focus are required. The accompanying appendix provides detail in relation to some of the key measures monitored closely by the service which help to evidence the improvements identified within the main report.

### 2. Issues for Consideration/Recommendations

- 2.1. Members of the Scrutiny Committee to note and comment on the updates in relation to Adults and Health performance trends captured within the cover report and supporting appendix.

### 3. Key Achievements

- 3.1. **Managing Demand** - Our continued focus on managing demand, improving outcomes and having strengths-based conversations with those seeking assistance within Somerset Direct (our call centre) has enabled the Adults team to routinely meet and maintain our target 60% resolution at first point of contact since July 2018 (*Appendix 1.1 refer*). Training and investment in call advisers has been crucial in achieving this and has also had the knock-on benefit of fewer repeat calls, fewer abandoned calls, and enhanced customer satisfaction levels. Somerset County Council's Customer Service team was awarded the best customer contact centre of its size in the region in the summer of 2018 in the South West Contact Centre Forum Awards.

In addition, we have seen significant improvements in the performance of our operational locality teams, with the number of overdue assessments reducing by 89% between June 2016 and December 2018, the average time for assessment completion improving from 53 to 18 days during that same time period (66% reduction) and the number of overdue reviews reducing by 50% (*Appendix 1.2 and 1.3 refer*).

- 3.2. **Hospital Interface** – We are committed to supporting people to maximise their independence and reduce or overcome the need for longer term support by working with therapists, social workers and community agents to support successful reablement and help by providing the right support at the right time. Our Home First initiative is enabling community partners, the NHS and

ourselves to facilitate the early discharge of people from hospital across the County. Organisations are working together with people and their families to support the early discharge and reablement of people in their home environment as well as in short term reablement placements where appropriate. The Home First service has developed significantly in the last 12 months and on average we are now seeing approximately 75 people being discharged per week onto a pathway across the county. This has contributed to our improved delayed transfers of care performance.

- 3.3. **Delayed Transfers of Care** - An increased understanding of themes and scrutiny of long stay patients with a more robust oversight of data and multi-disciplinary decision making has seen the DTOC performance of the Somerset system significantly improve over the last 6 months. At the end of December 2018 we achieved a DTOC result of 1.38% against a target of 2.5% and this has been sustained. The proportion of delays attributable to Adult Social Care has decreased significantly for the second month running to 29% in November (October's performance was 40%). The national average for November was 30.0%. This is the lowest this figure has been since we've been recording in this way and is the first time we've ever been below the national average. (*Appendix 1.4 and 1.5 refer*)
- 3.4. **Care provider quality** - The quality of local regulated care provision in Somerset has seen steady and continuous improvement over recent years, evidenced by the growing proportion of providers judged by the Care Quality Commission (CQC) to be 'Good' or 'Outstanding'. In November 2016, 83% of providers were 'Good' or better. This figure rose to 87% in November 2017, and latest statistics for February 2019 reveal that Somerset had over 92.9% of providers achieving a 'Good' or better rating, with no inadequate provision. Somerset's performance in this area exceeds regional and national averages and is testament to hard work and a rigorous focus on ensuring quality across our system. We work closely with the CQC and our health commissioning partners to monitor struggling providers and take robust action to support their improvement. (*Appendix 1.6 refer*)
- 3.5. **Staff Satisfaction and Health Check survey results** – The results from the most recent Staff Survey on Engagement painted a positive picture of progress across Adults Services over the last 12 months. With a total of 172 staff across the service responding (a response rate of 42%, above the Council average of 40%), feedback suggests that our staff feel confident with our strategic vision for promoting independence and adopting person-centered approaches, are equipped to 'do it their way' and have the freedom and support to use their initiative and challenge the status quo, and are benefitting from approachable management.
- 3.6 Initial analysis of themes and comments to emerge from the Social Work Health Check also indicate that our staff are generally positive about working for the service, satisfied with training opportunities on offer, and also with communication. The average caseload reported by Social Workers is 18.

**3.6. Investment in recruitment, leadership and team culture development -**

With support and investment from our HR colleagues, a range of activity has been undertaken over the past year to enhance leadership capabilities, team cohesion and professional development, including the provision of tailored, bespoke support. In response to a recognised challenge in recruiting to vacant Locality Lead positions across our operational teams, we have recently launched an Adults Locality Lead Development Programme, to develop leadership skills across the ASC service and support our own staff to step up into a leadership role.

- 3.7. Practice Quality Conversations** - Our Practice Quality auditing tool was designed as a means of monitoring and evidencing the quality of practice in promoting independence and strengths-based approaches, and intended to engage frontline staff in constructive, reflective conversations alongside senior managers. Launching in April 2018, it has proved to be an effective way to share learning and improve the visibility of managers with staff across the county. We are seeing growing number of monthly audits achieve a 'high assurance' rating overall (*Appendix 1.7 refer*) and continue to have positive feedback from both staff and service users in relation to the process itself and the service received. Comments received last month from frontline staff include in the following:

*“As a newly qualified OT I want to know if I am doing what is expected of me. I also want to continually improve my practice and therefore having a mechanism to do this was really positive. Also, as we work on our own for much of the time, it is really beneficial to receive some constructive feedback, including written feedback with some learning / action points to take forward”*

*“I found it useful as it gives you time to sit and talk through the processes and reflect on the work that I carried out, as I think some times we get caught up in the processes and don't have time to reflect. I think it covers all the areas that we need to be considering as ASC practitioner and that naturally leads to a forum for good case discussion”*

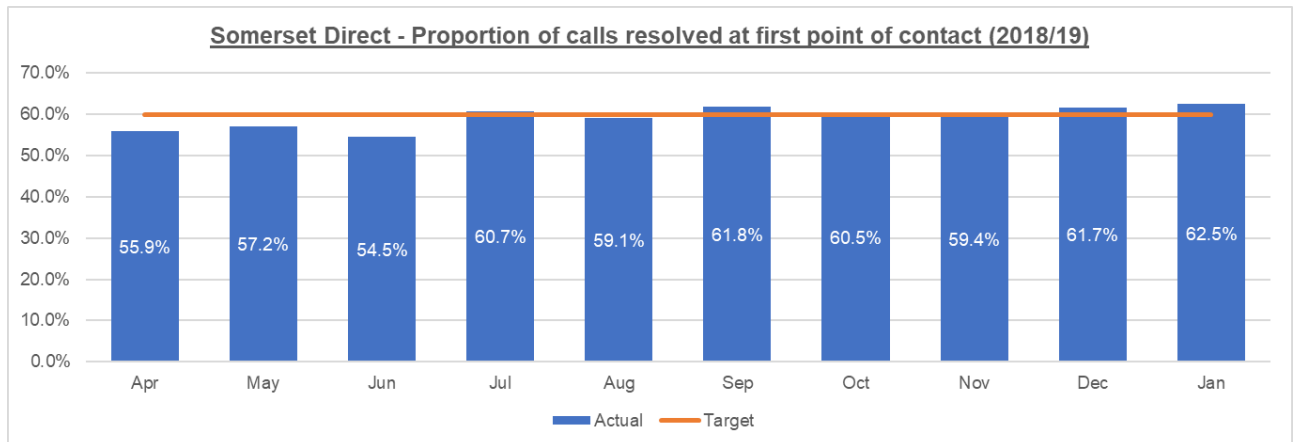
**4.0 Performance priorities for the year ahead**

- 4.1** We want all Somerset residents to be able to have equal access to mainstream support within their local community, and tailored assistance to support where they require it. As such, a key transformational priority for the service over the coming year will be to focus further attention on the experience of and outcomes achieved by individuals with Learning Disabilities and/or Mental Health social care needs.

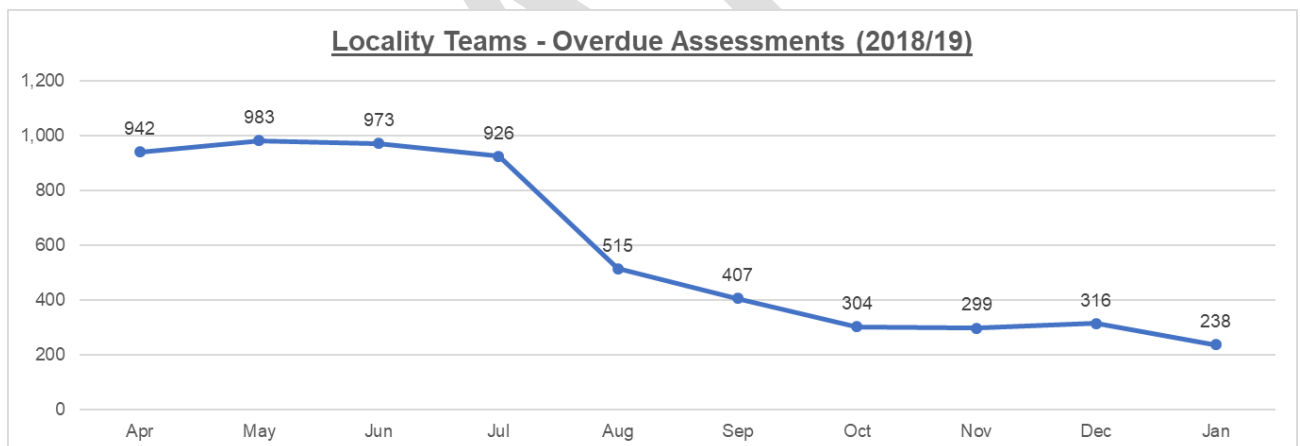
- 4.2** Though proud of our progress over the past year, we recognise there is more to be done and a range of areas whether we can make further improvements. As part of the corporate service planning process we are reviewing all of the reported performance measures and will be introducing stretch targets to ensure that we are seeking continual improvement. We also routinely benchmark Somerset's performance against both our regional neighbours and the local authorities in our "family group" to ensure we are able to identify and learn from best practice in other areas.

## Appendix – ASC Performance Trends

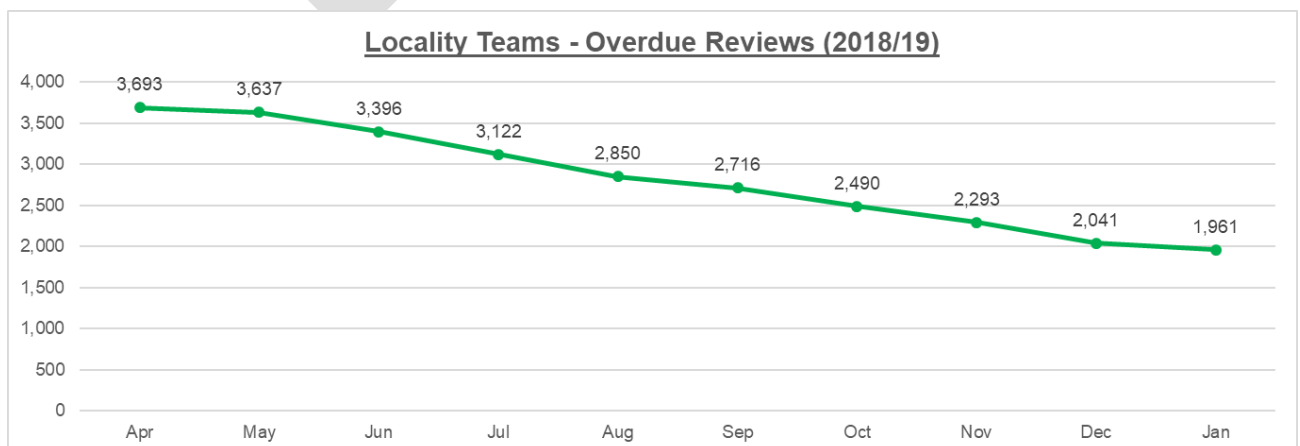
### 1.1 Somerset Direct – proportion of calls signposted from April 2018 to January 2019.



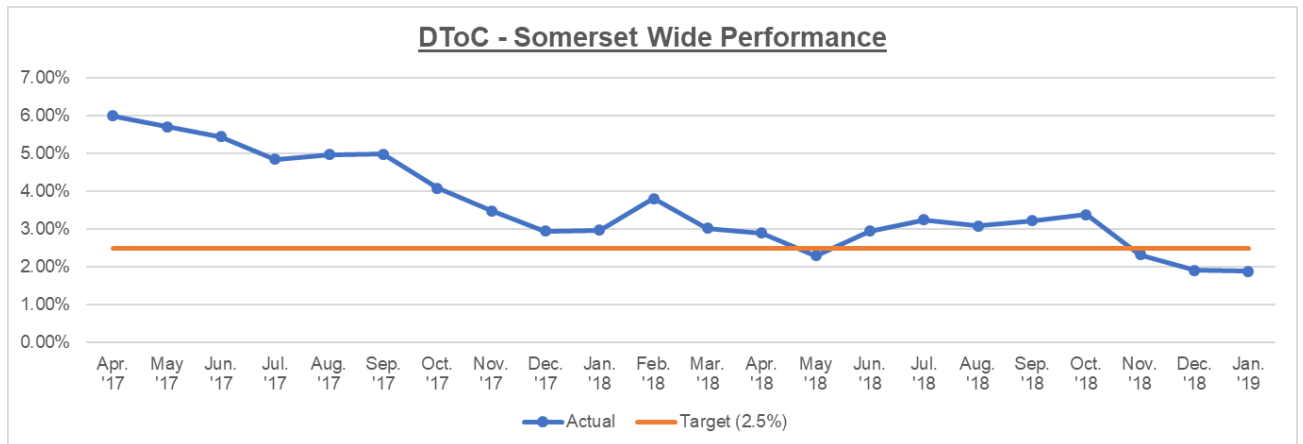
### 1.2 Locality Teams – reduction in overdue assessments from April 2018 to January 2019.



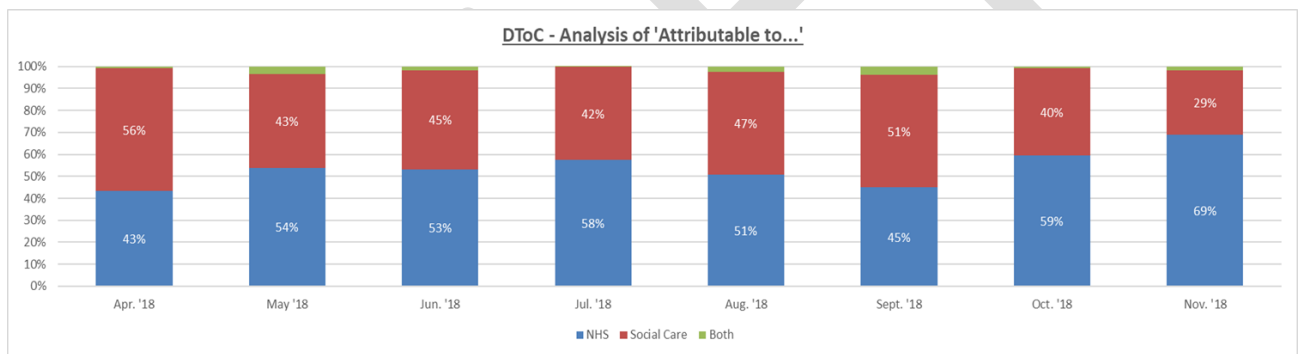
### 1.3 Locality Teams – reduction in overdue reviews from April 2018 to January 2019.



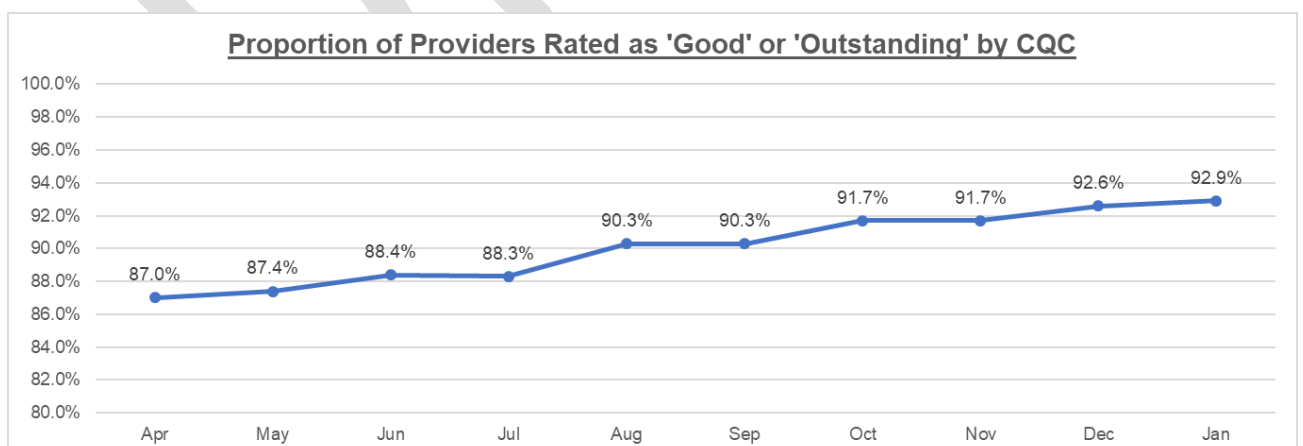
1.4 Delayed Transfers of Care (DToC) – system-wide performance from April 2017 to January 2019.



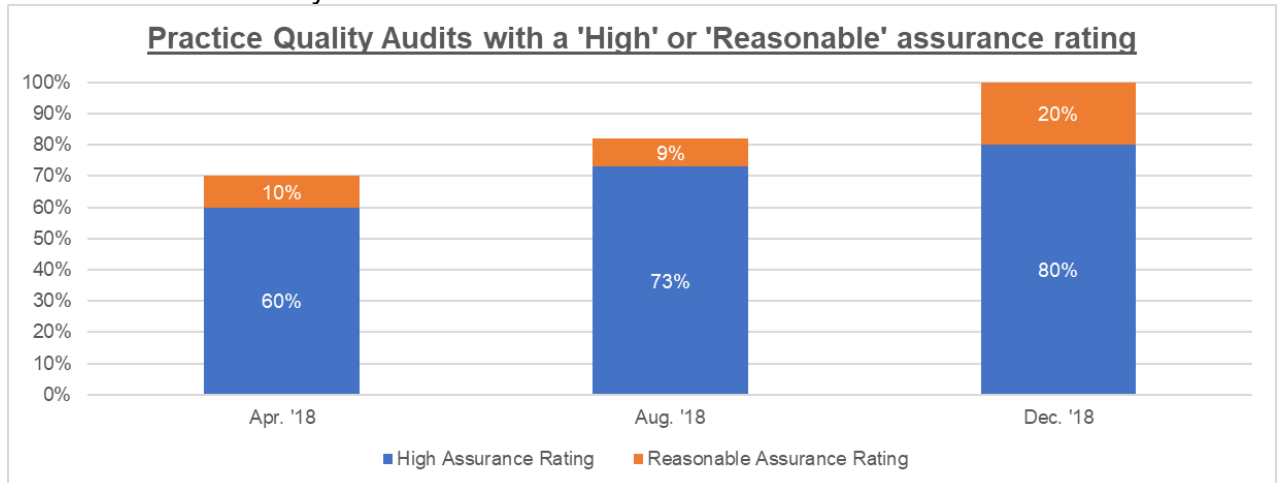
1.5 Delayed Transfers of Care (DToC) – analysis of attributable organisation from April to November 2018.



1.6 Providers with CQC rating of 'Good' or 'Outstanding' from April 2018 to January 2019.



### 1.7 Practice Quality Audits.



DRAFT



## Discovery – Scrutiny Update

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Cabinet Member: David Huxtable

Division and Local Member: N/A

### 1. Summary

1.1. This report provides scrutiny with an update on the performance of the Discovery contract. It includes overall measures of the contract, and also provides wider information on the delivery of the contract. It includes specific updates on:

- Key Performance Indicators and general performance
- transformational activity, including day services, employment support and reviews of people supported
- financial update of the contract
- challenges to delivery and quality performance
- stakeholder update

### 2. Issues for consideration / Recommendations

2.1 Scrutiny is asked to note the current performance of the Discovery contract as set out in section 5.1

2.2 Scrutiny is asked to note the wider engagement with stakeholders, including parent carers and volunteers. This group has had a particular focus on contract performance and quality but also how learning and developments can be utilised across other learning disability services commissioned by SCC.

2.3 Scrutiny is asked to note the progress of the reviews of people supported by Discovery.

2.4 Scrutiny is asked to note the financial position of the contract and the community fund set up from the social value element of the enterprise

### 3. Key Performance Information

3.1 A summary of the Key Performance Indicators (KPI) associated with the delivery of the 'Discovery' contract is provided in Section 8 below. A narrative has been included to provide context for the data.

3.2 Somerset (SCC) commissioners remain satisfied that Discovery overall are delivering a safe service that is meeting the required standards set out in the contract and striving to deliver a quality service. However, commissioners have been made aware of staffing difficulties and its impact on quality in the period leading up to and following Discovery's restructure. From the detailed work between both commissioners and Discovery, it is expected (inline with the

experiences elsewhere) that this is a temporary issue.

- 3.3** SCC commissioners are currently discussing amending and strengthening the Performance Indicators and Target Service Levels for Contract Year three with Discovery. The intention at this time is to commence a move to outcome-based measures with more focus on individuals and personalisation, which will apply across the whole learning disability provision in Somerset not solely Discovery. This year SCC will also include a review of the Performance Management regime and reporting to ensure it is still fit for purpose for both organisations, whilst improving the oversight of the contract.

**3.4** CQC inspections

CQC continue to carry out unannounced inspections of 'Discovery' locations in line with their planned inspection regime and in response to concerns raised directly to them from Stakeholders.

The last service to have its first CQC inspection was Amberleigh, which has received a "good" rating overall and noted some areas of good practice, particularly in people supported having good choice and control over their lives, staff who were caring and kind and the service had been making good links and relationships with families and carers. There were areas for improvement, namely keeping up to date on people's medication changes, which was particularly important where people come for periodic respite stays and how medication is stored and recorded.

Further inspection reports on the second round of inspections will be advised through later Scrutiny updates.

**3.5** Crisis Support

As has been reported previously to the Scrutiny committee, the Crisis Support Service provided at Oak House had been identified as providing a poor level of service, prior to transfer to Discovery. SCC commissioners and Somerset Clinical Commissioning Group have been developing a new delivery model for the Crisis Support Service and to facilitate this the Service will be closed on March 16<sup>th</sup> 2019. SCC is supporting Discovery as it moves the last 2 customers who are currently within the Service. Both SCC and Discovery have believed since transfer that the move will deliver better outcomes for the individual concerned, including a very positive development of home ownership for one person.

As advised to scrutiny previously SCC agreed to the suspension of the KPI's linked to this element of the contract whilst the new Service delivery model is being developed and implemented.

**3.6** Employment Services

The employment services' new staffing and management structure has now been in place since November 2018. This was the last step in resolving long standing Service issues that were impacting on the delivery of this component. This service is improving month on month despite the challenges and there are number of some excellent outcomes that have been achieved for people. Scrutiny is asked to review the examples of this can be found in Section 8 of

the report.

The number of referrals that Adult Social Care has made to the service over the last 12 months, due to social workers' knowledge of what is provided by the employment service and the wider challenge of raising the aspirations for people, has not been as high in year 2 as in year 1. Discovery have been successful in converting the people that have been referred, but the volume has been lower.

Adult Social Care has been working with Discovery during the period of January to March, to not only refer more people into the employment service, but also support the people who are seeking other options as an alternative from traditional day services, for example Six Acres and Fiveways.

#### **4. Transformation and Reviews update**

**4.1** Alongside the staffing and management changes, Discovery have been progressively changing services, with the successful completion of three residential homes de-registering. These services are now providing supported accommodation; meaning that the people supported within have a legal right of tenancy; experience greater choice and control over how their support is delivered and are able to access a wider range of benefits and income. The people in these services are being regularly consulted with and early indication is that people are happier and getting better lives. The landlord, Golden Lane Housing is also supporting people to understand their new responsibility as tenants as well as providing the housing related support they will provide to people.

There is a plan in place to deregister three further services and tenancies to start 8<sup>th</sup> April 2019. The CQC de-registration process has already started. The project plan in place to identify key responsibilities and milestones. This is monitored and actioned weekly by SCC and Discovery. Reviews are being undertaken and in one locality are almost complete.

A learning event has been undertaken from the first phase of de-registrations and this learning has been incorporated in the next three homes to transfer to supported accommodation. The learning set identified that services and families needed a greater understanding of supported living services. To address this in phase 2 all services will have a baseline audit jointly undertaken by SCC commissioning, operations and Discovery locality managers using Reach and NDTI supported living standards and methodology. The first audit of Springview was carried out on 19/2/2019 and has identified further team learning which is being addressed by a Discovery coach. A further update will be provided to Scrutiny once these homes have transferred.

#### **4.2 Day Time support update**

The transformation of all the traditional, building based day services is underway within Discovery. SCC and Discovery share an aim of people being supported to have meaningful, progressive and community-based activities or learning. The first two services to go through this process are Six Acres in Taunton and Fiveways in Yeovil, with closure dates for these buildings of March 29<sup>th</sup> 2019 and August 30<sup>th</sup> 2019 respectively.

Discovery have identified a suitable community venue in Taunton, to support people from the surrounding area and give much better community presence, being based in a mixed-use space. This furthers the aim of people with a learning disability having true community inclusion and presence. For those accessing support within Yeovil they will continue to have the St. James provision available and Discovery are continuing to source, in partnership with family members and people supported at least one other community venue in Yeovil and the surrounding areas.

Of the 96 people supported at Six Acres, everyone has at least one other option made available to them and most have more. Already the positive outcomes of moving from a traditional model of day care are being evidenced, with 27 individuals (or 28%) people accessing universally available community provision (for example health and wellbeing activities), more people taking up routes into employment and those that do need higher levels of support, it being provided in a much more person-centred way. A good example of this is a gentleman that had been attending Six Acres for over 15 years, whilst provided by the LDPS, who was an elective mute. Discovery have been helping him to have a greater level of community presence and exploring alternative options. Since he has moved away from the large and bustling Six Acres site, he has started speaking for the first time in 12 years as well as learning a range of new independence skills, including cake baking.

The transformation of the day services has also provided an excellent opportunity for local business and organisations, who had not previously thought about being more inclusive, to do so and flourish and grow. Although there has been some negativity in the press, the reality is that there is a level of disruption and uncertainty for people which does cause distress, people do now have the opportunity for better lives and outcomes after this disruption.

There are still some transformation areas that have not been as successful, for example Seahorses in Minehead. The intention is to build this up to a community hub venue, with a great deal more community inreach and outreach for people. This has not worked well, as people are not yet getting the outcomes all would want. Part of this response is Discovery and commissioners will be looked to put additional help and resources into this service to effect the desired changes and we will look to work alongside the people supported and their families.

#### **4.3** Reviews update

A focus has been given on achieving the aim of everyone within Discovery being reviewed by December 2018. Adult Social Care has completed the clear majority of the reviews, where these reviews have not been completed, this is due to wanting to make sure that the person supported, or their family are able to attend at a time convenient to them. A summary of the current position of reviews across all of the locality social work areas is provided below.

South Somerset has been a particularly area of difficulty, due to the large number of Discovery services located within this locality area, as well as working in partnership with the people and families at Fiveways to get the assessments agreed, meaning some have taken longer to complete than

expected.

Day Services	Mendip	Sedgemoor and West Somerset	South Somerset	Taunton
Six Acres Fiveways Beckery Colliers Court  Sea Horses Rollercoaster Laurels Huntspill	Mendip have completed reviews with individuals and families. On-going work to ensure outcomes are being achieved. Looking at support from Community Agents.	All day services completed apart from 1 who attends Huntspill project.	Fiveways all done and St James and The Beckery booked, The Laurels not yet booked	Six Acres completed
Residential to Supported Living				
Russet Eldermere Old Farm House Newholme Cherry Trees Spring View	Eldermere Competed Care orders completed and Finance and Benefits referrals.  Cherry Trees - Met with individuals and families hours have been agreed with individuals and families.	None identified for SAWS	All will be allocated next week / 18 <sup>th</sup> Feb.	Newholme - all completed, follow up review.
Supported Living				
	Jasmine - Reviews have been completed with individuals and family	SAWS all completed  1 in hospital 2 arranging with family.	47 in total, 33 completed and 14 outstanding	Taunton all completed apart from 2, booked in with JT

	members. Care orders to be completed.			
Residential				
		SAWS all completed	12 in total, 7 completed, 5 outstanding	All allocated - 3 outstanding to complete
Dom Care				
	4 outstanding reviews - all have allocated workers.		All allocated	All completed.
Respite				
	Amberleigh - 6 outstanding reviews, all booked in for next week.  Oak allocated worker - actively working with.	Amberleigh -1 allocated	Amberleigh Respite all allocated and in progress or completed	No respite provision

In total:

- Taunton have completed **167** assessments, with people having a care plan and Personal Budget produced after (PB)
- South Somerset have completed **147** assessments, with people having a care plan and a PB produced after
- SAWS have completed **150** assessments, with people having a care plan and PB produced after
- Mendip have completed **177** assessments, with people having a care plan and PB produced after

It is expected that following the completion of an Adult Social Care assessment of need, ASC staff should completed a care plan with agreed outcomes for or with the person, based on their assessment of need. Discovery are then responsible for co-producing a personal support plan, based on the information from the assessment and care plan. This should include the individual outcomes for people and the activities and support to do this. A detailed update on the number of provider support plans will be given in a future update to Scrutiny.

## **5.0 Financial update**

**5.1** The contract is performing as expected, within the financial modelling, with a relatively small underspend in year 1 that was returned to the County Council and a projection of being on budget in year 2. The underspend in year 1 was resultant of the local authority not purchasing at the level expected, for example within the Crisis service, short break service or where there were vacancies within services post transfer.

**5.2** In line with the service specification commissioned by SCC built in to the Discovery cost model is the requirement to produce a surplus. At present this is 3.7% of the total contract cost, which is consistent with the expected surplus of any not for profit or charitable organisation. This surplus amount is split equally, with half being spent within Somerset on social value activities. This is also meeting a key requirement of achieving 'Social Enterprise' status. The remainder of the surplus is to be kept in reserve by Discovery.

The reserve amount is to be build up or used as required over the lifetime of the contract and will ensure that the company is financially robust and resilient and able to withstand any unforeseen change to market factors. The actual surplus generated in year one of the contract was £1.260m, meaning £630,000 will be invested into social value activities through a social value fund.

The social value fund is being administrated by Somerset Community Foundation on behalf of Discovery, with any individual or organisation able to meet the criteria able to submit bids that will directly positively impact on the lives of people with a learning disability. This fund will be a valuable tool for Somerset as a whole to improve the lives of people with a learning disability, allowing investment at grass roots level as well as the valuable infrastructure that might support growth.

The fund has been widely advertised creatively by Discovery throughout Somerset, including through social media and BBC Radio. It is hoped that this first round will have a good amount of applications, although there will be further rounds of bidding throughout the year.

Behind the fund sits a Strategic Partnership Board, that has representation from Discovery and Somerset County Council and forms part of the delivery of the contract. This board will be the final decision makers on the fund and agree the final disbursement of the social value fund, if the value of the bids exceeds the amount available.



**5.3** A small amount of the social value fund has been ring-fenced for the “All Together Better” programme, which is a journey of understanding, information, rights and how to work well with health and social care. The course will bring people who need support, family, carers, voluntary and third sector organisations and practitioners to learn together and make key changes in their local area in order that people get a life rather simply a service.

The Benefits:

- *Create a local network actively working in co-production together to help effect positive change within their communities*
- *Give participants an understanding of history, images of what is possible and how change happens within a local and national context*
- *Engage people to have different conversations about what works*
- *Unite people to support, learn and share with each other and their groups*
- *Give real and grounded information, advice and support to people around the current health and social care agenda*
- *Give a good mix of inspiration and information around all the most relevant up to date models, theories and policies.*

**5.4** Questions have been raised through council and cabinet regarding the use of “equalisation reserve” for Discovery and the funding that has been set against it as “savings” within the Medium-Term Financial Planning. This funding is not a cut or additional funding to Discovery, but a change in the way that the Council accounts for the cost of the Discovery contract over the 6-year term.

It was recognised by the LD Programme Board before the inception of the contract that costs, particularly in the early years would exceed the previous LDPS budget availability and that staying in house or externalising would both bring additional financial pressures in years to come. Whilst either option would bring financial pressure to the authority, the Board felt that the creation of the



SEV would give greater flexibility and freedom to modernise, bringing greater value for money in the longer term and most importantly, providing an improved level of service to people supported.

Given the financial pressures on the authority at the time, the Board agreed to the creation of an Equalisation reserve to smooth the projected additional early year costs over the lifetime of the contract. It was recognised however that further transformation would be required throughout the contract in order to bring spend down further, thereby making the contract affordable over its lifetime. This Equalisation reserve is a mechanism that the local authority uses to spend more in the early years of the contract and pay off in later years, when the contract value reduces.

At the end of year 1 of the contract, the amount transferred to the equalisation reserve was £4.910m. The original plan was for this to be added to during year 2 and for efficiencies to be achieved over the contract year 3 onwards, so that the equalisation reserve was returned to zero by the end of year 6. However, due to greater efficiencies achieved by Discovery in year 1 & 2 and across Adult Social Care as a whole, has meant that it is now intended for the £4.910m to be repaid at the end of 2018/19 and for the contract to be fully funded within the budget available going forward. This demonstrates that the creation of the SEV was not only better to improve people's lives, but also more cost effective than retaining it within the local authority, which only had a projection of annual increases.

## **6.0 Challenges to delivery and quality performance**

**6.1** As described in section 3.0, Discovery have had a whole service management restructure that concluded in November 2018. Leading up to this and during this restructure, Discovery have experienced a much higher than normal level of staff leaving or retiring, which has caused impacts on performance in some areas of the service.

**6.2** Where these challenges in staffing are occurring, for example where a manager or assistant manager has left, there has been a resultant effect of direct care staff deciding that they also wish to leave. For clarity, Discovery have not made any direct contact care staff redundant, but some staff have decided to leave. This is very common in the care sector, where direct care staff that have formed a close working relationship to a manager choose to follow or are encouraged to leave and work for the manager in another setting. For example, 19 staff have left Discovery to work at just three organisations that have recruited managers that either left Discovery or have been made redundant.

This loss of staff has meant that the performance within particular services has dropped, where bank staff or agency staff have been used. This impact has not been universal, but has been experienced in some residential care, supported accommodation and day services.

Adult Social Care has been fully aware of this developing situation and as with any other provider in the social care market, is taking both inspection action and supportive action to ensure that Discovery remedy any drops in performance or quality of their delivery. Where increased safeguarding activity or self-reporting of problems is occurring, ASC social workers, social work staff and quality monitoring officers are implementing improvement plans.

**6.3** The CQC and the local authority has also had notification from a set of family members about concerns in the performance and most importantly, the safety of the people supported. In one instance, the local authority has supported Discovery to ensure safe staffing levels in a service where it felt it was needed. This service has stabilised, and the staffing levels or safety of residents is no longer of concern.

Discovery currently has three separate improvement plans in place and is fully complying with the actions contained within. ASC staff in both safeguarding and quality monitoring have noted that Discovery staff and managers have been open and transparent with any investigation or information gathering and implement fully any recommendations. Somerset CC had already recognised some of the concerns raised in the family's letter and had been working with Discovery to address them.

As a result of the concerns, CQC have met with family members as well as inspecting some sites and Discovery are awaiting the result of this. No immediate action has been requested of Discovery by CQC, indicating there were no concerns at a regulatory level. Managers of the Safeguarding team will also be meeting with the families to hear in person and ASC will provide further reporting by exception to Scrutiny on any further concerns raised.

Where individual safeguarding concerns are raised, these are being dealt with as per our statutory duty and responsibility, as with any other provider. The level of individual safeguarding does not represent a deviation from any other provider of the size of Discovery or supporting this number of people.

The Safeguarding team manager for Somerset County Council has met with all of the Discovery team managers and senior staff because of the letter from family members and felt that the level of understanding and compliance to safeguarding practice of Discovery staff was good. She has no concerns organisationally about Discovery.

Somerset County Council is proud of the fact that Somerset's providers have bucked the national trend and have an overall 92.9% good or outstanding rating with CQC, of which Discovery have helped play a part with many good rated services across their registered bases.

**7.0 Stakeholder feedback** – this section has been supplied by the stakeholder group

**7.1** The Stakeholder Engagement Group has had regular, constructive, meetings with senior Commissioners and Discovery Executives. These meetings are scheduled to continue throughout the coming year.

The Group has agreed the following initiatives.

**7.2** Post Social Worker Review/Initial Needs Assessment (INA) Questionnaire.

Stakeholders are aware of anecdotal evidence that some customers and carers have felt their review/INA has not been conducted as thoroughly as they would like. This questionnaire has been designed to capture factual evidence on the

views of customers and carers following their Social Worker Review or INA. It seeks to ascertain the level of satisfaction of customers and their families on completion of the process and will provide a useful benchmark against which to judge the effectiveness of the review/INA process. It will be introduced for all LD Social Worker Reviews and or INAs from April 2019. Completion of the questionnaire is completely optional; however, customers and carers are encouraged to make use of this opportunity to record their experiences so that the Review process can be refined and improved in future.

### **7.3** Quality Checking.

Independent Quality Checking of services is an essential component of Performance Monitoring. Commissioners have agreed to set up a Quality Checking Group which will carry out visits to a range of provider (not just Discovery) venues to make an assessment of the quality of service delivery from a user perspective. The Quality Checking team will include, but not be limited to, customers (experts by experience) and carers. Their findings will be made public. The Quality Checking visits are planned to commence in April 2019. However, within Discovery they have already designed and led a quality checking initiative which has been visiting their own services, sharing the learning and experience with SCC to help develop wider checking across Somerset. These quality checkers have presented to the Learning Disability partnership board and Discovery contract meeting and update on their work.

### **7.4** Customer Mapping.

An exercise is underway to digitally map the geographical location of all LD customers across the County. The purpose is to identify potential groups of customers and make them aware of each other's proximity, so that customers who are trying to achieve similar outcomes can learn together and share their support. Being aware of other LD customers in the vicinity will also open up the possibility of sharing support from volunteers, families and friends in the local community. This exercise is due to be completed by mid-March 2019

### **7.5** Outcome Based Performance Assessment.

Currently the performance of Discovery is measured largely in inputs. Inputs only measure volumes of activity, in most cases hours of support or numbers of referrals. They give no indication of the effect the activity is having on customers who receive the activity. It is perfectly possible for a provider to deliver 100% of the contracted hours of support, without having any positive effect on the customer. The effect on the customer should be progress towards achieving the outcomes in their Care and Support Plan, for example living a more independent life, or progress towards achieving generic outcomes applicable to all customers, such as having equal opportunity to be part of their community. Only by measuring progress towards the achievement of individual and generic outcomes can the effectiveness and therefore the value for money of a provider's performance be meaningfully assessed. Commissioners have agreed with the Stakeholder Group that Outcome Based Performance measurement of all providers, including Discovery, should become an essential element of performance assessment.

The stakeholder group have asked that a range of further Information be presented to Scrutiny, giving a wider breadth of information than the KPI and

PI information, it is supplied as an appendix and will be provided at each scrutiny update

## 8.0 Feedback and further information:

8.1 Although Somerset County Council and Discovery recognise that there is still some way to go to ensure that every single person supported by Discovery gets a consistent, excellent service, there are some examples that Discovery and commissioners would like to share with Scrutiny Committee to recognise not only the changes happening, but also the day to day, positive examples of excellent support that is going on in Discovery.

## 8.2

### Hinkley Point Traineeship



- 6 Interns
- Travel Training (Somerset Passenger Solutions)
- On-Boarding
- CITB – Operatives Test
- Job Matching
- InWork Support

#### Meet Finn...

Finn is 20 years old and been a diagnosis of Sotos-Like Syndrome and experiences associated difficulties e.g.; poor concentration, word finding problems, problems with short term memory, behavioural difficulties including ritualistic behaviours, social difficulties.

Finn had undertaken lots of volunteering role before being referred to the traineeship, but non of these had led to paid employment and both Finn and his family were becoming very frustrated with the lack of outcomes despite his hard work ethic.

Finn worked really well in his role as Storesman. Picking orders, loading orders along with completing relevant paperwork. He has been working on deliveries and using the internal computer system to process the paperwork to completion.

Finn had to be on site ready for work at 7:00 which means he has to leave home 2 hours due to the travel to site.

Due to all his hard-work he was successful at interview and gained a 40 hour- Full time position with Bylor earning £10.27ph.

Finn's Quote – I really enjoyed the programme and I love my job, we go for breakfast every morning

Steve's Quote (Bylor Manager) – Finn is a hard worker and has really changed and improved our teams dynamics

Miranda's Quote (Mum) - It is great to see a happy and independent Finn, this has made a huge difference to our family life.



discovery  
Get more from life

## 8.3 Hi Z

*I would like to commend the staff at Selwyn for the good work they are carrying out with MS.*

*I have seen him today and he looks like a new man he is relaxed, looks ten years younger, he is clean he has shaved, skin is now clear, he is losing weight. His family, myself and Dr G cannot believe the difference and this is down to the staff at Selwyn.*

*Many thanks  
Social Worker*

8.4 Also included is a narrative from a member of staff in Discovery that wished to have their story told to the Scrutiny committee

*My name is Adam Walker I worked for Somerset County Council for about 8 years before moving across to Discovery with the rest of my colleagues in April 2017. Shortly after this I decided to apply for a job with the Quality and Compliance team, seeing it as a great opportunity for me to learn and improve my skills and hopefully have a positive impact on the wider organisation.*

*My role involves me visiting different homes around Somerset and reviewing their paperwork, speaking to staff and relatives about how they feel the service is doing, and speaking with people supported to ensure their voices are heard.*

*I put all of my findings into a report for the locality manager and advise them on key areas of compliance that they need to focus on, for example their risk management process or their fire safety systems.*

*Under Somerset County Council this job simply didn't exist, so essentially a lot of homes had no one really checking the quality of the service provided.*

*Needless to say the job can be difficult at times, when we find something that isn't as it should be and then we have to work hard to find solutions. However, this extra focus on safety, quality and accountability within Discovery has undoubtedly led to some massive improvements for the people we support.*

*A good example of this is at a service I visited recently. I first visited this service in 2017 and had a lot of concerns about the quality and safety of the service provided and had to escalate these concerns to senior management. When I visited recently, I was so pleased to see that the behaviour support team had been in and supported the team, the health and safety team had been in and reviewed the service and the recommendations raised in my report had been actioned. This had resulted in a sharp drop in the frequency and severity of incidents at this home and big improvements in the safety for staff and people supported.*

*Also I must mention Quality Checkers, these are people who we provide support to, who are employed by Discovery to support me with feedback about the services, it is such a lovely experience to have people supported involved in the organisation, having a say in how things are done, being part of the team, breaking down those barriers between people supported and staff.*

**Adam Walker**

**Quality & Compliance Reviewer - Discovery**

## **9.0 Background papers**

### **9.1 Scrutiny report – May 2018 and October 2018**

<http://democracy.somerset.gov.uk/documents/s6699/LD%20TaskFinish.pdf>  
<http://democracy.somerset.gov.uk/ieListDocuments.aspx?CId=186&MId=564&Ver=4>

### **9.2 Balance scorecard for the period of October 2018 to January 2019 & Key Performance Indicator information**

These are supplied under Appendix A – E

**Note** For sight of individual background papers please contact the report author

## Appendix A – Scrutiny Key Performance Information

### Key Performance Indicator Summary table

KPI/ Month		Range	April	May	June	July	August	September	October	November	December	January
<b>Residential Short Breaks Service</b>												
% of stays cancelled by the Supplier in the period		Target Service Level - 0 - 2%	0%	0%	0%	0.6%	0.0%	0.0%	0.0%	1.1%	0.0%	0.0%
<b>Supported Living</b>												
Utilisation of core (shared) element of service		Target Service Level - 95 - 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
% of individual hours delivered		Target Service Level - 90 - 100%	98.0%	100.2%	97.6%	97.5%	97.2%	95.0%	100.8%	99.2%	99.1%	95.6%
<b>Employment Services</b>												
% of new referrals accepted for:	Employment Support	Target Service Level - 95 - 100%	100%	100%	88%*	100%	100%	100%	100%	100%	100%	100%
	Employment Crisis Support		100%	100%	No Crisis Referrals				100%	No Crisis Referrals		100%
Number of customers achieving maintained employment and/or self-employment (Annual Measure)		Target Service Level - 85 - 100%	44/80 55.00%	45/80 56.00%	47/80 59.00%	47/80 59.00%	48/80 60.00%	50/80 62.50%	50/80 62.50%	54/80 67.50%	55/80 68.75%	59/80 74.75%
<b>Day Services</b>												
% of day time support delivered		Target Service Level - 90 - 100%	99.4%	103.6%	104.2%	100.8%	101.0%	100.0%	100.0%	98.0%	99.0%	95.0%

\*Two referrals were not accepted – one referrals was from an individual who did not have a Learning Disability and was therefore not eligible the other had serious health and other issues that needed to be addressed before any employment support.

# Appendix B – January Scorecard

Discovery LD Contract Balanced Scorecard January 2019																																										
<p>Supplier Contact: Luke Joy-Smith Donna Smith</p>		<p>Contract Value: £205,911,399</p>		<p>Contract Expiration: March 2023 Length of contract: 6 years</p>		<p>SCC Contract Owner: Dale Newland</p>																																				
				<p>SCC Contract Commissioner: Steve Vevers CCG Lead Commissioner: Eelke Zoetsbergen</p>		<p>Contract Reference: DN90274</p>																																				
<p><b>Areas of concern</b></p> <p>Recruitment remains a key priority within Discovery and current recruitment and retention initiatives are under review and we expect to be frequently reviewed in what is clearly a candidate-led environment. In the meantime, Discovery continues to attract a large number of applications every month and are seeing a notable reduction in leavers, now that the re-organisation work has concluded. Associated to this, experienced resources from the Dimensions group have increased supporting local delivery.</p>						<p><b>Areas of success</b></p> <p>The window for 'All Together Better' has now closed and approximately 30 applicants have been invited to join the course, starting in March. The attendees are an equal mix of people with a learning disability, families/friends and professionals (commissioners, support workers, managers).</p> <p>The Discovery Community Fund remains open until 22<sup>nd</sup> February, at the time of writing, 18 different applicants have started the application process, with approximately 12 submitting an application. The fund has been promoted on BBC Radio Somerset.</p>																																				
Finance & Risk				Performance & Outcomes																																						
Measure	Period	Risk	Previous RAG	Current RAG	DOT	Measure	Both Amberleigh and Newholme were inspected by CQC in January. This is the first time these locations have been inspected under Discovery. At the time of writing this report, we have not received the draft inspection for Newholme. For Amberleigh, the draft report has been received and shows that a thorough inspection has been carried out by an experienced CQC inspector. The report also picks up on the scrutiny Discovery has been under since the contract transfer and therefore is a more detailed report than may be usually expected. In its draft format the report rates the location as requiring improvements in the safe domain, but rates all other domains as 'Good' and the location as overall 'Good'.																																			
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	January	As with last month, the key risk remain on Quality and People matters			1. Training compliance continues to rise among competing operational challenges.	Number of CQC inspection and outcomes and mitigation																																				
Contract Charge vs Contract Actual Spend	January				Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables		Revised Change Control document to be created to reflect transformation plans																																			
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	January				Discovery Audit outcomes by 5 key areas. (Greenway Cottages, Selwyn, Fosse Park)		<table border="1"> <thead> <tr> <th>Services Audited=4</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>0</td> <td>73%</td> </tr> <tr> <td>Partially Meeting Expectations</td> <td>1</td> <td>3</td> <td>3</td> <td>2</td> <td>4</td> <td></td> </tr> <tr> <td>Not Meeting Expectations</td> <td>3</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> <td></td> </tr> </tbody> </table>	Services Audited=4	Safe	Effective	Caring	Responsive	Well Led	Average Compliance	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	0	73%	Partially Meeting Expectations	1	3	3	2	4		Not Meeting Expectations	3	0	0	1	0	
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True Up Activity - service charges and sleep ins/sleep in top-up	N/A						Discovery remains on track with all overall contractual obligations																																			
Overall Revenue	January				Performance against the suppliers litigation to pay its Sub-contractors within 30 days of an undisputed invoice		Fulfilled																																			
	January				Reporting of sustainability and energy efficiency indicators	January	Discovery is committed to ensuring all systems and processes consider the sustainability and energy efficiencies within their decision making.																																			
	January				Social Value Outcomes	January	The Strategic Partnership Board is established with SCC presence. The first round of applications is to be reviewed mid March. 'All Together Better' funded by SPB to commence																																			
	January				Summary of Employment Support quarterly report highlighting areas of concern	January	There were no areas of concern in the quarter. However, there have been some great successes in employment, especially at Hinkley Point C.																																			
	January				Number of CQC inspection and outcomes and mitigation	January	Discovery and SCC Commissioners have agreed the CQC's approach of inspecting all of Discovery's Services in the first Quarter of 2019 severely disadvantaged Discovery's ability to meet the expected service level and as such the Authority has agreed to suspend any Service penalties due against the CQC																																			

Workforce & Partnerships			Customers & Communication						
Measure	Period	Result	Measure	Period	Comments/Statement				
Staff Absence (Average days lost to team staff sickness)			Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on 'you said, we did' framework and are being well managed by Discovery.				
Starters & Leavers Analysis			Compliance with Contract Governance	January	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.				
Workforce Totals - Excluding Relief			Statement of relationship with the suppliers key stakeholders	January	People we support seem positive from front-line delivery to senior management and largely demonstrated in recent surveys and feedback from Quality Consultants/Checkers. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Locality Managers very much focussed on the future. Families/Advocates - concerns remain around transformation activity, especially Day Services and turnover of colleagues. SCC - Partnership between Discovery and SCC is positive to ensure the contract is a success.				
Staff Retention - newstarters who have left during their training/induction period									
Agency Staff Analysis in Hrs	January		Safeguarding/Never Events - number of incidents and mitigation	January	<table border="1"> <tr> <td></td> <td>9</td> <td>9</td> <td></td> </tr> </table> No Never Events held in January		9	9	
	9	9							
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	January	In place							



**Discovery LD Contract Balanced Scorecard December 2018**

Supplier Contact Luke Joy-Smith Donna Smith	Contract Value: £205,911,399	Contract Expiration: March 2023 Length of contract: 6 years	SCC Contract Owner: Dale Newland	SCC Contract Commissioners: Steve Veewers CCG Lead Commissioner: Eelke Zoestbergen	Contract Reference: DN90274
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**Areas of concern**

Discovery continues to address the long standing quality issues (in addition to the recruitment challenges). At the time of writing 25 Discovery locations have now received a second internal quality review and the scores show consistent increase in compliance (bar 2 locations). In some locations these have been significant increases. However, the scores remain consistently lower than across the rest of the Dimensions Group. It is likely this would have been different were it not for the required colleague transformation work (i.e. restructure), however, it also underlines the depth and breadth of quality issues which transferred and have previously been reported on. Discovery are confident that with the restructure now in place it provides the required strong and reliable platform to build good quality support upon.



**Areas of success**

The Strategic Partnership Board (SPB) have now launched its first round of applications to the new 'Discovery Community Fund' (i.e. the social value return). The first round will fund appropriate applications from a pot of around £200k. In addition to the already commissioned 'All Together Better' course, 'All Together Better', is a nationally recognised course designed by In-Control, has now been launched in Somerset. Arrangements have been made to promote it in Wiltshire in Somerset. They will be presenting at the Somerset Safeguarding Adults Board's summer conference. They have also written directly to Avon and Somerset Constabulary to provide some free training on Hate Crime, based on positive training courses they have facilitated nationally, in addition to last month's introduction to Amanda Watson, Discovery's Associate Family Consultant. Positive conversations have taken place with a second consultant, who Discovery hope to announce in January.

Finance & Risk	Performance & Outcomes
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Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.	Measure	No CQC inspections held in December																																			
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	December	As with last month, the key risk remain on Quality and People matters					Number of CQC inspection and outcomes and mitigation																																				
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Workforce Totals - Excluding Relief			Statement of relationship with the suppliers key stakeholders	December	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.																																								
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Agency Staff Analysis in Hrs	December		Safeguarding/Never Events - number of incidents and mitigation	December	g	g																																							
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	December	In place				No Never Events held in December																																							

Discovery LD Contract Balanced Scorecard November 2018

Supplier Contact:  
Luke Joy-Smith  
Donna Smith

Contract Value:  
£205,911,399

Contract Expiration: March 2023  
Length of contract: 6 years

SCC Contract Owner:  
Dale Newland

SCC Contract Commissioner:  
Steve Yeevers  
CCG Lead Commissioner:  
Eelke Zoestbergen

Contract Reference:  
DN90274

Areas of concern

Discovery continues to address the long standing quality issues (in addition to the recruitment challenges). At the time of writing 25 Discovery locations have now received a second internal quality review and the scores show consistent increase in compliance (bar 2 locations). In some locations these have been significant increases. However, the scores remain consistently lower than across the rest of the Dimensions Group. It is likely this would have been different were it not for the required colleague transformation work (i.e. restructure), however, it also underlines the depth and breadth of quality issues which transferred and have previously been reported on. Discovery are confident that with the restructure now in place it provides the required strong and reliable platform to build good quality support upon.



Areas of success

The Strategic Partnership Board (SPB) have now launched its first round of applications to the new 'Discovery Community Fund' (i.e. the social value return). The first round will fund appropriate applications from a pot of around £200k. In addition to the already commissioned 'All Together Better' course, 'All Together Better', is a nationally recognised course designed by In-Control, has now been launched in Somerset. Arrangements have been made to promote it throughout Somerset. They will be presenting at the Somerset Safeguarding Adults Board's summer conference. They have also written directly to Avon and Somerset Constabulary to provide some free training on Hate Crime, based on positive training courses they have facilitated nationally. In addition to last month's introduction to Amanda Watson, Discovery's Associate Family Consultant. Positive conversations have taken place with a second consultant, who Discovery hope to announce in January.

Finance & Risk					Performance & Outcomes																																							
Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.	Measure	No CQC inspections held in December																																				
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	December					As with last month, the key risk remain on Quality and People matters	Number of CQC inspection and outcomes and mitigation																																					
Contract Charge vs Contract Actual Spend	December						Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables	December	G →																																			
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	December						Discovery Audit outcomes by 5 key areas (Greenway Cottages, Selwyn, Fosse Park)	December	<table border="1"> <thead> <tr> <th>Services Audited=3</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td></td> </tr> <tr> <td>Partially Meeting Expectations</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>2</td> <td></td> </tr> <tr> <td>Not Meeting Expectations</td> <td>2</td> <td>1</td> <td>1</td> <td>0</td> <td>1</td> <td>77%</td> </tr> </tbody> </table>	Services Audited=3	Safe	Effective	Caring	Responsive	Well Led	Average Compliance	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	1		Partially Meeting Expectations	1	1	1	1	2		Not Meeting Expectations	2	1	1	0	1	77%
Services Audited=3	Safe	Effective	Caring	Responsive	Well Led	Average Compliance																																						
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True Up Activity - service charges and sleep ins/sleep in top-up	Oct and Nov						Discovery remains on track with all overall contractual obligations	December																																				
Overall Revenue	December						Performance against the suppliers obligation to pay its Sub-contractors within 30 days of an undisputed invoice	December	Fulfilled																																			
						Reporting of sustainability and energy efficiency indicators	December	Discovery is committed to ensuring all systems and processes consider the sustainability and energy efficiencies within their decision making.																																				
						Social Value Outcomes	December	The Strategic Partnership Board is established with SCC presence. The first round of applications is likely to take place before the end of December 2018 and Partners for																																				
						Summary of Employment Support quarterly report highlighting areas of concern	December	There were no areas of concern in the quarter. However, there have been some great successes in employment opportunities at Hinkley Point C.																																				
						Number of CQC inspection and outcomes and mitigation	December	Discovery and SCC Commissioners have agreed the CQC's approach of inspecting all of Discovery's Services in the first Quarter of 2018 severely disadvantaged Discovery's ability to meet the expected service level and as such the Authority has agreed to suspend any Service operations in respect this																																				

Workforce & Partnerships			Customers & Communication		
Measure	Period	Result	Measure	Period	Comments/Statement
Staff Absence (Average days lost to team staff sickness)			Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on 'you said, we did' framework and are being well managed by Discovery.
Starters & Leavers Analysis			Compliance with Contract Governance	December	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.
Workforce Totals - Evolving Relief			Statement of relationship with the suppliers key stakeholders	December	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/Advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.
Staff Retention - newstarters who have left during their training/induction period					
Agency Staff Analysis in Hrs	December		Safeguarding/Never Events - number of incidents and mitigation	December	No Never Events held in December
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	December	In place			

# Appendix E – October Scorecard

Discovery LD Contract Balanced Scorecard October 2018																																									
Supplier Contact Luke Joy-Smith Donna Smith		Contract Value £205,911,399		Contract Expiration: March 2023 Length of contract: 6 years		SCC Contract Owner: Dale Newland																																			
SCC Contract Commissioner: Steve Vevers CCG Lead Commissioner: Eelke Zoestbergen			Contract Reference: DN90274																																						
<b>Areas of concern</b> As previously reported and detailed within the NDTI report commissioned by Discovery. Historical culture issues remains a key priority within the overarching transformation requirements within the contract.				<b>Areas of success</b> The launch of the new management structure on 1 <sup>st</sup> November has provided a focus on the future and moving forward. This concludes a significant period of colleague uncertainty albeit necessary change.  The recently formed Strategic Partnership Board (SPB) still expect that the first round of awards will be made before the end of December 2018. The SPB have supported the application to fund In-Control's 'Partners in Policymaking' which provides the opportunity to benefit many stakeholders within Somerset, with the view to promote and commence this opportunity in early 2019.  Communications about the changes at Six Acres have been cascaded to all stakeholders, with a positive meeting with circa 45 families held on 14 <sup>th</sup> November, answering a number of concerns.																																					
Finance & Risk				Performance & Outcomes																																					
Measure	Period	Risk	Previous RAG	Current RAG	DOT	1. Training compliance continues to rise among competing operational challenges.																																			
Contract Risk & Issues Profile (Top 3 risks/issues for delivery of the contract)	October	No further changes to the risk register as reported last month.				Number of CQC inspection and outcomes and mitigation																																			
Contract Charge vs Contract Actual Spend	October	<b>Contract Charge v Contract Spend Oct 2018</b> 			Reporting by Exception: Progress against Transformation milestones and/or key dates for any projects/plans/deliverables	All expected Discovery Locations have been rated by the Care Quality Commission (CQC) through their first inspections is as follows:  • Eleven locations rated 'Good' and final reports have been received, with location (The Maples, having an 'outstanding' domain). • Two locations rated 'Requiring Improvement' and final reports have been received (Ashbury and Saplings) • One location is awaiting inspection (Amberleigh) – this will be delayed due to late transfer from SCC to Discovery, likely to take place in spring 2019.  All other RCH's are unlikely to be inspected due to de-registration plans or closure (Oaks).																																			
Service Delivery Volumes - 3 Months Data excluding Nights and Residential Short Breaks	October				Discovery Audit outcomes by 5 key areas.	<table border="1"> <thead> <tr> <th>Services Audited= 1</th> <th>Safe</th> <th>Effective</th> <th>Caring</th> <th>Responsive</th> <th>Well Led</th> <th>Average Compliance Score</th> </tr> </thead> <tbody> <tr> <td>Exceeding Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Meeting Expectations</td> <td>0</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td></td> </tr> <tr> <td>Partly Meeting Expectations</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> <tr> <td>Not meeting Expectations</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> <td>68%</td> </tr> </tbody> </table>	Services Audited= 1	Safe	Effective	Caring	Responsive	Well Led	Average Compliance Score	Exceeding Expectations	0	0	0	0	0		Meeting Expectations	0	1	1	1	1		Partly Meeting Expectations	1	0	0	0	0		Not meeting Expectations	0	0	0	0	1	68%
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True Up Activity - service charges and sleep ins/sleep in top-up	N/A	<b>Aug-Sept 18 Sleep in Top up</b> 				Discovery remains on track with all overall contractual obligations																																			
Overall Revenue	October	<b>Contract Revenue Oct 2018</b> 			Performance against the suppliers obligation to pay its Sub-contractors within 30 days of an undisputed invoice	Fulfilled																																			
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					Social Value Outcomes	The Strategic Partnership Board is established with SCC presence. The first round of awards is likely to take place before the end of December 2018 and 'Partners for Policymaking' is likely to be implemented.																																			
					Summary of Employment Support quarterly report highlighting areas of concern	There were no areas of concern in the quarter.																																			
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Workforce & Partnerships			Customers & Communication																																									
Measure	Period	Result	Measure	Period	Comments/Statement																																							
Staff Absence (Average days lost to team staff sickness)		<p>Average Days Lost to Team Sickness</p> <p>Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18</p> <p>■ Average Number of days sick per Colleague ■ National Avg (Days)</p>	Reporting of Supplier Satisfaction Results or any proposed Satisfaction Surveys to be launched for any of the services delivered under the contract. (including complaints)		All 4 surveys closed and shared on the website and with all stakeholders. Action plans have been developed on you said, we did framework and are being well managed by Discovery.																																							
Starters & Leavers Analysis		<p>Starters vs Leavers</p> <p>Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18</p> <p>■ Joiners (hrs) ■ Leavers (hrs)</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Joiners (hrs)</th> <th>Leavers (hrs)</th> </tr> </thead> <tbody> <tr><td>Nov-17</td><td>978.5</td><td>472.5</td></tr> <tr><td>Dec-17</td><td>305</td><td>394</td></tr> <tr><td>Jan-18</td><td>715</td><td>385</td></tr> <tr><td>Feb-18</td><td>412.5</td><td>122.5</td></tr> <tr><td>Mar-18</td><td>496</td><td>382</td></tr> <tr><td>Apr-18</td><td>978.5</td><td>441</td></tr> <tr><td>May-18</td><td>658.5</td><td>634.5</td></tr> <tr><td>Jun-18</td><td>572</td><td>602</td></tr> <tr><td>Jul-18</td><td>769</td><td>591.5</td></tr> <tr><td>Aug-18</td><td>126.5</td><td>791</td></tr> <tr><td>Sep-18</td><td>3096.42</td><td>1734</td></tr> <tr><td>Oct-18</td><td></td><td></td></tr> </tbody> </table>	Period	Joiners (hrs)	Leavers (hrs)	Nov-17	978.5	472.5	Dec-17	305	394	Jan-18	715	385	Feb-18	412.5	122.5	Mar-18	496	382	Apr-18	978.5	441	May-18	658.5	634.5	Jun-18	572	602	Jul-18	769	591.5	Aug-18	126.5	791	Sep-18	3096.42	1734	Oct-18			Compliance with Contract Governance	October	Current contractual compliance is on track although meeting schedules have been changed in agreement between SCC and Discovery.
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Oct-18																																												
Workforce Totals - Excluding Relief		<p>Target Hours vs Actual Hours against Overall Target</p> <p>Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18</p> <p>■ Target Hours ■ Actual Hours</p>	Statement of relationship with the suppliers key stakeholders	October	Customers - Customer relationship seems positive from front-line delivery to senior management and largely demonstrated in recent surveys. Colleagues - some transferred colleagues remain concerned by transformation activity but more colleagues are focussed on looking forward. Families/Advocates - concerns remain around transformation activity, especially Day Services. SCC - Relationship stays positive between Discovery and SCC.																																							
Staff Retention - newstarters who have left during their training/induction period		<p>Starters vs Leavers within Induction period</p> <p>Nov-17 Dec-17 Jan-18 Feb-18 Mar-18 Apr-18 May-18 Jun-18 Jul-18 Aug-18 Sep-18 Oct-18</p> <p>■ New Starters ■ Leavers &lt; 3 months</p>																																										
Agency Staff Analysis in Hrs	October	<p>October</p> <p>■ August ■ Sept ■ Oct</p> <p>Supported Living Registered Care Day Services/Dom Care</p>	Safeguarding/Never Events - number of incidents and mitigation	October	<p>g g</p> <p>One Never Event panels held in October. Rating remains green as this new process introduced by Discovery captures valuable learning to improve the support for people with learning disabilities both within and beyond Discovery.</p>																																							
Business Continuity and/or Disaster Recovery Plans are in place and have been provided to SCC	October	In place																																										

## Scrutiny for Adults and Health Work Programme – March 2019

Agenda item	Meeting Date	Details and Lead Officer
	<b>13 March 2019</b>	
Discovery Performance Update		Steve Veevers
CCG Quality, Safety and Performance Report		Debbie Rigby
Adult Social Care Performance Report		Mel Lock/Stephen Chandler
	<b>03 April 2019</b>	
Autism Services update		James Slater, Somerset CCG
Dementia Strategy		Fiona Hawker, CCG
Mental Health Services		Stephen Chandler/Mel Lock
Working Age Adults with Learning Disabilities		Stephen Chandler/ Mel Lock
Somerset Safeguarding Adults Board (SSAB) - Update		Stephen Miles +Independent Chair
	<b>08 May 2019</b>	
Oral Health Services		NHS England
Somerset CCG Finance update		Alison Henley, CCG
Somerset CCG Primary Care Committee update		Michael Bainbridge, CCG
	<b>05 June 2019</b>	
CCG Quality, Safety and Performance Report		Debbie Rigby
Adult Social Care Performance Report		Mel Lock/Stephen Chandler
Update on the Temporary Closure of Community Hospital Inpatient Wards		Phi Brice, Somerset Partnership
Relocation of the hydrotherapy Pool and Service from Musgrove Park Hospital		Phil Brice, Somerset Partnership
	<b>03 July 2019</b>	
Proposal for a Review of Somerset Podiatry Clinic Locations		Phil Brice, Somerset Partnership
Proposals to Redevelop the Summerlands Site, Yeovil		Phil Brice, Somerset Partnership
	<b>11 Sept 2019</b>	
CCG Quality, Safety and Performance Report		Debbie Rigby
Adult Social Care Performance Report		Mel Lock/Stephen Chandler
	<b>02 Oct 2019</b>	

## Scrutiny for Adults and Health Work Programme – March 2019

	<b>06 Nov 2019</b>	
	<b>04 Dec 2019</b>	
CCG Quality, Safety and Performance Report		Debbie Rigby
Adult Social Care Performance Report		Mel Lock/Stephen Chandler

**Note:** Members of the Scrutiny Committee and all other Members of Somerset County Council are invited to contribute items for inclusion in the work programme. Please contact Lindsey Tawse, Democratic Services Leader, who will assist you in submitting your item. [ltawse@somerset.gov.uk](mailto:ltawse@somerset.gov.uk) 01823 355059. Or the Clerk Jennie Murphy on [jzmurphy@somerset.gov.uk](mailto:jzmurphy@somerset.gov.uk)

Add to 2020 Work Programme:-

Jan 2020 Nursing Home Support Service  
(NHSS)-



## Somerset County Council Forward Plan of proposed Key Decisions

The County Council is required to set out details of planned key decisions at least 28 calendar days before they are due to be taken. This forward plan sets out key decisions to be taken at Cabinet meetings as well as individual key decisions to be taken by either the Leader, a Cabinet Member or an Officer. The very latest details can always be found on our website at:

<http://democracy.somerset.gov.uk/mgListPlans.aspx?RPId=134&RD=0&FD=1&bcr=1>

Regulation 8 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 defines a key decision as an executive decision which is likely:

- (a) to result in the relevant local authority incurring expenditure which is, or the making of savings which are, significant having regard to the relevant local authority's budget for the service or function to which the decision relates; or
- (b) to be significant in terms of its effects on communities living or working in an area comprising two or more wards or electoral divisions in the area of the relevant local authority.

The Council has decided that the relevant threshold at or above which the decision is significant will be £500,000 for capital / revenue expenditure or savings. Money delegated to schools as part of the Scheme of Financial Management of Schools exercise is exempt from these thresholds once it is delegated to the school.

Cabinet meetings are held in public at County Hall unless Cabinet resolve for all or part of the meeting to be held in private in order to consider exempt information/confidential business. The Forward Plan will show where this is intended. Agendas and reports for Cabinet meetings are also published on the Council's website at least five clear working days before the meeting date.

Individual key decisions that are shown in the plan as being proposed to be taken "not before" a date will be taken within a month of that date, with the requirement that a report setting out the proposed decision will be published on the Council's website at least five working days before the date of decision. Any representations received will be considered by the decision maker at the decision meeting.

In addition to key decisions, the forward plan shown below lists other business that is scheduled to be considered at a Cabinet meeting during the period of the Plan, which will also include reports for information. The monthly printed plan is updated on an ad hoc basis during each month. *Where possible the County Council will attempt to keep to the dates shown in the Plan. It is quite likely, however, that some items will need to be rescheduled and new items added as new circumstances come to light.* Please ensure therefore that you refer to the most up to date plan.

For general enquiries about the Forward Plan:

- You can view it on the County Council web site at <http://democracy.somerset.gov.uk/mgListPlans.aspx?RPId=134&RD=0&FD=1&bcr=1>
- You can arrange to inspect it at County Hall (in Taunton).
- Alternatively, copies can be obtained from Scott Wooldridge or Michael Bryant in the Democratic Services Team by telephoning (01823) 357628 or 359500.

To view the Forward Plan on the website you will need a copy of Adobe Acrobat Reader available free from [www.adobe.com](http://www.adobe.com)  
Please note that it could take up to 2 minutes to download this PDF document depending on your Internet connection speed.

To make representations about proposed decisions:

Please contact the officer identified against the relevant decision in the Forward Plan to find out more information or about how your representations can be made and considered by the decision maker.

The Agenda and Papers for Cabinet meetings can be found on the County Council's website at:  
<http://democracy.somerset.gov.uk/ieListMeetings.aspx?CId=134&Year=0>

Weekly version of plan published on 1 February 2019

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<b>FP/19/01/07</b> First published: 22 January 2019	20 Feb 2019 Cabinet Member for Adult Social Care	Issue: Adult Social Care Fees and Charges 2019-20 Decision: Cabinet Member to agree the Adult Social Care Fees and Charges for 2019-20 including provider fee levels	Adult Social Care Fees and Charges 2019-20 Appendix A		Tim Baverstock, Strategic Commissioning Manager - Strategic Commissioning
<b>FP/18/12/08</b> First published: 18 December 2018	Not before 25th Feb 2019 Cabinet Member for Children and Families	Issue: Decision to extend contracts for Pathway to Independence (P2i) service for young people in Somerset Decision:	P2i Contract Extension Key Decision Feb19 150219		Rowina Clift-Shanley, Senior Programme Manager , Business Change
<b>FP/18/10/03</b> First published: 23 October 2018	Not before 11th Mar 2019 Cabinet Member for Education and Council Transformation	Issue: A change to the protocol for schools converting to a sponsored academy retaining any surplus revenue balances, and the charging for academy conversions by the authority Decision: To consider the report			Ken Rushton, Service Manager - School Finance Tel: 01823356911

Weekly version of plan published on 1 February 2019

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<p><b>FP/18/11/11</b> First published: 21 November 2018</p>	<p>Not before 11th Mar 2019 Cabinet Member for Adult Social Care</p>	<p>Issue: Decision to conclude the establishment of an Open Framework Agreement for Reablement Providers in Somerset Decision: To award an open framework that will ensure continued and new supply of reablement care across the county, mirroring the current arrangement for homecare. This follows interim contractual arrangements that were put in place following the unsuccessful</p>			<p>Tim Baverstock, Strategic Commissioning Manager - Strategic Commissioning</p>
<p><b>FP/19/01/02</b> First published: 3 January 2019</p>	<p>Not before 11th Mar 2019 Interim Finance Director</p>	<p>Issue: Acceptance of European Regional Development Funding for the Heart of the South West Inward Investment Project Decision: Approval for Somerset County Council (SCC), in its capacity as the accountable body for the Heart of the South West Local Enterprise Partnership, to accept £1,181,308 of European Regional Development Funding (ERDF) for the Heart of the South West Inward Investment Project and to enter into an associated funding agreement with the Ministry for Housing, Communities and Local Government (MHCLG)</p>			<p>Paul Hickson, Strategic Manager - Economy and Planning Tel: 07977 400838</p>

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<b>FP/18/12/09</b> First published: 20 December 2018	Not before 11th Mar 2019 Cabinet Member for Resources	Issue: Disposal of part of of the Six Acres Day Centre site, Taunton Decision: Disposal of part of the Six Acres Day Centre site, Taunton			Charlie Field, Estates Manager, Corporate Property Tel: 01823355325
<b>FP/18/11/10</b> First published: 20 November 2018	11 Mar 2019 Cabinet Member for Economic Development, Planning and Community Infrastructure, Economic and Community Infrastructure Commissioning Director	Issue: Decision to approve revisions to the Connecting Devon and Somerset phase 2 deployment contracts Decision: To approve revisions to the Connecting Devon and Somerset phase 2 deployment contracts			Nathaniel Lucas, Senior Economic Development Officer Tel: 01823359210
<b>To approve the appointment of a preferred contractor to proceed with a 7 classroom expansion for September 2020</b> First published: 12 February 2019	Not before 11th Mar 2019 Cabinet Member for Education and Council Transformation	Issue: Proposed Expansion of Willowdown Primary Academy, Bridgwater from 210 to 420 places Decision:			Elizabeth Smith, Service Manager – Schools Commissioning Tel: 01823 356260
<b>FP/18/11/01</b> First published: 13 November 2018	11 Mar 2019 Cabinet Member for Highways and Transport	Issue: Decision to extend the contract for Parking Enforcement and Related Services Decision: To extend the existing contract until June 2022 with appropriate break clauses			Steve Deakin, Parking Services Manager, Parking Services, Community and Traded Services Tel: 01823355137

Weekly version of plan published on 1 February 2019

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<b>FP/19/01/12</b> First published: 5 February 2019	Not before 11th Mar 2019 Cabinet Member for Public Health and Wellbeing	Issue: Adoption of the Somerset Air Quality Statement Decision: To agree the adoption of the statement			Stewart Brock, Public Health Specialist, Public Health Tel: 01823357235
<b>FP/10/01/11</b> First published: 5 February 2019	Not before 11th Mar 2019 Cabinet Member for Education and Council Transformation	Issue: Bridgwater College Academy Expansion - Funding Decision: To agree funding as required			Elizabeth Smith, Service Manager – Schools Commissioning Tel: 01823 356260
<b>FP/18/06/08</b> First published: 19 June 2018	Not before 11th Mar 2019 Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: To approve the appointment of a supplier to deliver the Wiveliscombe Enterprise Centre and Wells Technology Enterprise Centre Decision: To approve the appointment of a supplier	Key Decision Wells and Wiveliscombe		Nathaniel Lucas, Senior Economic Development Officer Tel: 01823359210
<b>FP/18/11/09</b> First published: 20 November 2018	Not before 11th Mar 2019 Director of Children's Services	Issue: Framework for the delivery of Food Produce to SCC properties Decision: Decision to award contract(s) to the successful supplier(s) following a competitive procurement exercise			Simon Clifford, Customers & Communities Director Tel: 01823359166

Weekly version of plan published on 1 February 2019

FP Refs	Decision Date/Maker	Details of the proposed decision	Documents and background papers to be available to decision maker	Does the decision contain any exempt information requiring it to be considered in private?	Contact Officer for any representations to be made ahead of the proposed decision
<b>FP/19/01/09</b> First published: 29 January 2019	11 Feb 2019 Director of Adult Social Services	Issue: Award of contracts for care and support services within Extra Care Housing (ECH) Schemes in Somerset Decision: Decision to approve award of contract for care and support services to Extra Care Housing Schemes in Somerset			Steve Veevers, Strategic Commissioning Manager Tel: 01823359155
<b>FP/19/01/06</b> First published: 22 January 2019	11 Mar 2019 Cabinet	Issue: Proposal for merger of existing Children's Safeguarding Board Executive Arrangements with the Children's Trust Board Decision: Cabinet is asked to agree the merger of the two executive bodies to fulfil the new arrangements to safeguard children under the revised legislation (Working Together to Safeguard Children 2018) from October 2018			Caroline Dowson, SSCB Business Manager
<b>FP/19/01/13</b> First published: 5 February 2019	11 Mar 2019 Cabinet	Issue: Social Value Policy Statement Refresh Decision: To agree a refreshed Social Value Policy Statement to guide the social value priorities of the council			Vikki Hearn, Strategic Manager - Commissioning Development
<b>FP/19/02/04</b> First published: 21 February 2019	11 Mar 2019 Cabinet	Issue: Month 10 Revenue Budget Monitoring Decision: To consider this report			Interim Finance Director

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<p><b>FP/18/07/05</b> First published: 17 July 2018</p>	<p>11 Mar 2019 Cabinet</p>	<p>Issue: Equality Objectives 2019 - 2023 and Equality Commitment Decision: Asking Cabinet to agree a new set of Equality Objectives for 2019 - 2023 and the new Equality Commitment</p>			<p>Tom Rutland Tel: 01823 359221</p>
<p><b>FP/19/01/10</b> First published: 29 January 2019</p>	<p>11 Mar 2019 Cabinet</p>	<p>Issue: Somerset Rivers Authority (SRA) Enhanced Programme of Flood Risk Management Works and the SRA Memorandum and Understanding of Constitution Decision: As SCC is the accountable body for the SRA the Cabinet is asked to approve the allocation of funds raised through an additional notional amount of Council Tax, for use by the SRA in 2019-20. The Cabinet is also asked to agree forward funding of SRA works in advance of recouping costs from a Heart of the SW Local Enterprise Partnership Growth Deal allocation. Also review the 2019/20 MOU and approve for signing by the Cabinet Member for Resources and Economic Development</p>			<p>David Mitchell, Technical Lead: Projects and Studies, Transport Policy Tel: 01823356789</p>
<p><b>FP/18/12/04</b> First published: 10 December 2018</p>	<p>11 Mar 2019 Cabinet</p>	<p>Issue: Award of Contract Bridgwater Special School Decision: To consider the report</p>			<p>Phil Curd, Service Manager: Specialist Provision and School Transport Tel: 01823 355165</p>



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<b>FP/19/02/06</b> First published:	26 Mar 2019 Cabinet Member for Children and Families	Issue: The School Building Condition Programme Decision: The Cabinet Member authorises appropriate officers under delegation to commission and deliver the School Building Condition programme within the allocation of capital funds for 2019/20 as approved by full Council on the 21 February 2019			Paula Hewitt, Director of Commissioning for Economic and Community Infrastructure Tel: 01823 359011
<b>FP/19/02/06</b> First published:	26 Mar 2019 Cabinet Member for Education and Council Transformation, Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: Creation of a new Academy in Somerset Decision: Chilton Trinity			Elizabeth Smith, Service Manager – Schools Commissioning Tel: 01823 356260
<b>FP/18/12/01</b> First published: 4 December 2018	Not before 13th Mar 2019 Cabinet Member for Education and Council Transformation, Director of Commissioning and Lead Commissioner for Economic Community Infrastructure	Issue: Creation of New Academies in Somerset Decision: Brent Knoll Church of England Primary School; Charlton Horethorne Church of England Primary School; North Cadbury C of E Primary School; Pawlett Primary School			Elizabeth Smith, Service Manager – Schools Commissioning Tel: 01823 356260

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<b>FP/18/03/04</b> First published: 12 March 2018	Not before 13th Mar 2019 Cabinet Member for Highways and Transport	Issue: Procurement for the construction of traffic signals improvements at the Rowbarton junction in Taunton Decision: To commence the process to secure a contractor to deliver the scheme to improve the traffic signals at Rowbarton junction in Taunton			Sunita Mills, Service Commissioning Manager Tel: 01823 359763
<b>FP/18/02/08</b> First published: 13 February 2018	Not before 18th Mar 2019 Cabinet Member for Highways and Transport	Issue: Taunton Transport Strategy Decision: To agree to adopt the joint (with TDBC) Taunton Transport Strategy			Lucy Bath Tel: 01823 359465
<b>FP/19/02/03</b> First published: 19 February 2019	Not before 21st Mar 2019 Cabinet Member for Children and Families	Issue: Early Years Block - Early Years Single Funding Formula (EYSFF) 2019/20 Decision: The base rate for EYSFF for 2019/20 for 3 and 4 year olds as £3.96 per child hour. The hourly rate for funded 2 year olds to remain the same as 18/19 at £5.04 per child per hour			Alison Jeffery
<b>FP/19/02/01</b> First published: 12 February 2019	1 Apr 2019 Cabinet Member for Resources	Issue: Disposal of Two County Farms - Spring / Summer 2019 Decision: Authority to conclude negotiations for the disposal of two surplus farms and lands including those disposals to be conducted via a public auction as appropriate			Charlie Field, Estates Manager, Corporate Property Tel: 01823355325

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<p><b>FP/18/12/05</b> First published: 10 December 2018</p>	<p>1 May 2019 Cabinet</p>	<p>Issue: The Somerset Children and Young Peoples Plan 2019-2022 Decision: The Children and Young Peoples Plan 2019-2022 is a multi-agency partnership vision for all children, young people and thier families to be happy, healthy and well-prepared for adulthood.</p>			<p>Philippa Granthier, Assistant Director - Commissioning and Performance, Children's Services Commissioning Tel: 01823 359054</p>
<p><b>FP/18/04/06</b> First published: 30 April 2018</p>	<p>Not before 3rd Jun 2019 Director of Commissioning and Lead Commissioner for Economic Community Infrastructure</p>	<p>Issue: Procurement of the HotSW Growth Hub Service Decision: To undertake the procurement of a Business Support Service (Growth Hub) on behalf of the HotSW LEP</p>			<p>Melanie Roberts, Service Manager - Economic Policy Tel: 01823359209</p>

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