



Meeting: **Adults and Communities Overview and Scrutiny Committee**

Date/Time: **Monday, 7 June 2021 at 2.00 pm**

Location: **Council Chamber, County Hall, Glenfield**

Contact: **Mrs L. Walton (0116 305 2583)**

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Membership

Mr. T. J. Richardson CC Mr. R. Hills CC
Ms. L. Broadley CC Mr. J. Miah CC
Mr. B. Champion CC Mrs. A. Wright CC
Mr. N. Chapman CC

**Please note: this meeting will be filmed for live or subsequent broadcast via the Council's web site at <http://www.leicestershire.gov.uk>
– Notices will be on display at the meeting explaining the arrangements.**

AGENDA

<u>Item</u>	<u>Report by</u>
1. Appointment of Chairman.	
2. Election of Vice Chairman.	
3. Minutes of the meeting held on 8 March 2021.	(Pages 5 - 12)
4. Question Time.	
5. Questions asked by members under Standing Order 7(3) and 7(5).	
6. To advise of any other items which the Chairman has decided to take as urgent elsewhere on the agenda.	
7. Declarations of interest in respect of items on the agenda.	



8. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.
9. Presentation of Petitions under Standing Order 35.
10. Provision of Short Breaks and Supported Living Services. Director of Adults and Communities (Pages 13 - 20)
11. Unison's Ethical Care (Home Care) and Residential Care Charters. Director of Adults and Communities (Pages 21 - 28)
12. Visual and Sensory Impairment Service. Director of Adults and Communities (Pages 29 - 36)
13. Procurement of Community Life Choices Services. Director of Adults and Communities (Pages 37 - 48)
14. Provisional Performance Report 2020/21. Director of Adults and Communities and Chief Executive (Pages 49 - 64)
15. Date of next meeting.

The next meeting of the Committee is scheduled to take place on 6 September 2021 at 2.00pm.
16. Any other items which the Chairman has decided to take as urgent.

QUESTIONING BY MEMBERS OF OVERVIEW AND SCRUTINY

The ability to ask good, pertinent questions lies at the heart of successful and effective scrutiny. To support members with this, a range of resources, including guides to questioning, are available via the Centre for Public Scrutiny website www.cfps.org.uk.

The following questions have been agreed by Scrutiny members as a good starting point for developing questions:-

- Who was consulted and what were they consulted on? What is the process for and quality of the consultation?
- How have the voices of local people and frontline staff been heard?
- What does success look like?
- What is the history of the service and what will be different this time?
- What happens once the money is spent?
- If the service model is changing, has the previous service model been evaluated?
- What evaluation arrangements are in place – will there be an annual review?

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Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held via Microsoft Teams video conferencing on Monday, 8 March 2021.

PRESENT

Mr. T. J. Richardson CC (in the Chair)

Mr. B. Crooks CC	Mr T. Parton CC
Mr. T. Gillard CC	Mr J. Poland CC
Mr. J. Miah CC	Mrs. A. Wright CC
Mr. M. T. Mullaney CC	Mrs. M. Wright CC

In attendance

Mr. R. Blunt CC – Cabinet Lead Member for Adults and Communities
 Mrs. C. M. Radford CC – Cabinet Support Member
 Mr Mukesh Barot – Healthwatch Leicester and Leicestershire

41. Minutes.

The minutes of the meeting held on 18 January 2021 were taken as read, confirmed and signed.

42. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 34.

43. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

44. Urgent Items.

There were no urgent items for consideration.

45. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Members of the Committee who were also members of district councils in Hinckley and Bosworth and North West Leicestershire declared a personal interest in the report on the Provision of Short Breaks and Supported Living Services (agenda item 8 - minute 48 refers).

All members of the Committee who were also members of district councils declared a personal interest in the report on Museum Accreditation – Review of Last Period of

Submission (2015-19) and Preparations for Next Submission (2022-2026) (agenda item 10 - minute 50 refers).

Mr. J. Poland CC declared a personal interest in agenda item 10 (Museum Accreditation – Review of Last Period of Submission (2015-19) and Preparations for Next Submission (2022-2026)) which included reference to Charnwood Museum, as the County Council operated this in partnership Charnwood Borough Council where he was a member of the Cabinet (minute 50 refers).

Mrs. A. Wright CC declared a personal interest in agenda item 9: Care Homes Sustainability (minute 49 refers) and agenda item 11: Framework for Integrated Personalised Care (minute 51 refers) as she was a health care solicitor working in the area.

46. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

47. Presentation of Petitions under Standing Order 35.

The Chief Executive reported that no petitions had been received under Standing Order 35.

48. Provision of Short Breaks and Supported Living Services.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to seek the Committee's view on the future use of the Trees Residential Care Home in Hinckley, and the proposed development of the site at Cropston Drive in Coalville, in advance of consultation and engagement with those who accessed services on these sites. A copy of the report marked 'Agenda Item 8', is filed with these minutes.

The Director in presenting the report advised the Committee of comments received from Mr M Wyatt CC as the local member for Coalville South. He reported that overall, Mr Wyatt had confirmed his support for the proposals but had asked that if development plans at the Cropston Drive site were to be less intensive, consideration be given to making appropriate use of the land space around the development, the effects to the borders and the local neighbourhood, and to ensuring adequate screening around the site by the planting of additional trees.

The Chairman highlighted that comments had also been received from Dr T Eynon CC as the local member for Coalville North, a copy of which had been circulated to Members and is filed with these minutes. In response the Director confirmed the following:

- (i) If the re-development of the Cropston Drive site was no longer required a small number of existing short breaks' service users in North West Leicestershire could be affected by increased travel to a new location, but the consultation process would provide an opportunity for those needs and the views of those service users and their families to be formally considered and their feedback would be used to inform future service proposals and development plans.

- (ii) Newer purpose-built units for short breaks including the newly refurbished units at the Trees Residential Care Home in Hinckley tended to provide better occupancy as the designs were often better suited to service user's needs. Occupancy levels for Short Breaks' services across the County were currently between 60-80% and the levels mainly depended on the individuals who resided in the Short Breaks' units and their space and support requirements.
- (iii) It was anticipated that any developments to Transforming Care (TC) services would require a joint approach between Health and Care. The Council and the NHS shared a trajectory to ensure good coordination of TC services to help provide people with the right accommodation and support in accordance with their needs. The Department had a directory of people seeking to move from educational or hospital accommodation into supported living arrangements. Whilst there had been a number of successes with people transitioning between these different types of living arrangements it was recognised that even with support, gaining a tenancy and taking on the responsibilities of community living could be a significant change for some and this would need factoring into any plans to re-develop TC services. Members noted that evidence had showed that people transitioning to a TC step through facility were more likely to remain and thrive in the community in the long-term.

Arising from discussion the following points arose:

- (iv) As part of the last short breaks services review in 2018 detailed analysis had been undertaken to consider the positioning of facilities across the County and the length of journeys service users would be required to undertake to reach these. It was the intention that a similar exercise would be undertaken again as part of this process and service arrangements and user requirements would be explored to ensure that facilities could be fully utilised, and occupancy maximised based on the needs of those eligible for this type of support.
- (v) The Lead Member emphasised that the former residents of the Trees Residential Care Home had always had the option to return to the Home once refurbished but had instead chosen to remain in their alternative accommodation. Service user choice would continue to be key in determining the future use of the Trees facility and also the Cropston Drive site (where there was now an option to have a less intensive development). The outcomes of the consultation with service users, including mapping to ensure adequate provision of short breaks' facilities across the County, would be crucial in this regard.
- (vi) The Committee welcomed and supported consultation and engagement on the proposals and noted that a further update would be provided on the outcomes of the consultation and the final proposals in due course. The Committee requested that the Director consider the comments made by the local members as part of the consultation process.

RESOLVED:

- (a) That proposals for the future use of the Trees Residential Care Home in Hinckley, and development of the site at Cropston Drive in Coalville be noted and the planned consultation and engagement on those proposals welcomed and supported.

- (b) That the comments submitted by local members be noted and welcomed and the Director requested to consider these as part of the consultation process.
- (c) That the comments now made by the Committee on the future proposals for the provision of short breaks and supported living services be submitted to the Cabinet for consideration.

49. Care Homes Sustainability.

[Mr M Mullaney CC and Mrs A Wright CC left the meeting at this point and did not return to the meeting.]

The Committee considered a report of the Director of Adults and Communities which provided an update of the current position in care homes across Leicestershire and the support being offered to them by the County Council to provide safe and effective care, in the context of the ongoing Covid-19 pandemic. A copy of the report marked 'Agenda Item 9', is filed with these minutes.

Arising from discussion the following points arose:

- (i) Members noted the uncertainty of future Government funding for infection control and rapid testing which had been provided in response to the Covid-19 pandemic but due to come to an end on 31 March 2021. Members further noted that the free Personal Protective Equipment (PPE) scheme launched by the Government last year was only due to run until June 2021. It was not yet known whether such Government support would be extended.
- (ii) A member raised concern about the impact this would have on care homes emphasising that the Covid-19 pandemic was ongoing, and without sufficient funding they would be under additional pressure to manage infection control and to source PPE out of existing shrinking budgets. It was questioned what level of financial support the Council could realistically provide to care homes in this regard if no further funding from the Government was made available. The Director advised that it was difficult to be certain at this stage until the Government had confirmed its plans, but it was expected that a flexible approach would be needed, and the Council would have to consider requests for support on a case by case basis.
- (iii) It was acknowledged that the additional pressures and costs care homes were experiencing as a result of the pandemic were likely to continue for some time, and if the additional Government income stopped and vacancy levels continued to rise, the risks to resident and staff welfare and overall sustainability of the sector would increase. Assurance was provided that the Department would continue to work closely with service providers to monitor the situation and provide support wherever possible, keep in regular contact with other authorities, both regionally and nationally, and feed into national research which was being undertaken to evidence the pressures and costs care homes were facing. Members noted that one of the key areas that would be considered over the coming months as part of the research was regarding insurance premiums.
- (iv) A member questioned the potential impact locally if a large group of care homes collapsed due to lack of financial viability. The Director provided assurance that larger organisations would likely be able to offset some of the risks by making use

of their other care homes within their group. However, smaller organisations might have less options available. The Director highlighted that whilst the sector overall was comprised mainly of large national organisations, the local composition was mixed which was thought provided a level of resilience. Members were pleased to note that, as well as keeping in regular contact with service providers, the Council also received wider intelligence from a number of other organisations including other local authorities, the Care Quality Commission and the emergency services who were often able to provide a good indication of the risks present, particularly regarding national organisations.

- (v) It had recently been reported in the national news that the UK's largest care provider, HC One, was planning to close four of its care homes and put 52 up for sale. Members were advised that HC One owned a small number of homes in Leicestershire, but fortunately the Council had received confirmation that these homes would be unaffected by the plans and were to remain open. However, the Council was continuing to liaise with HC One to ascertain whether people from Leicestershire that had been placed in HC One care homes out of County would be affected by the closures.
- (vi) A member confirmed their support for the Unison Ethical and/or Residential Charter Marks and the approach being undertaken by the Council to consider the options for and implications of signing up to this.
- (vii) The Committee expressed its thanks to the staff in the Adults and Communities Department for their ongoing commitment and efforts to support care homes and commended officers on the comprehensive report. The Chairman also highlighted the importance of members continuing to offer their support and involvement in the work being undertaken to support care homes going forward.

RESOLVED:

That the update on care homes sustainability be noted.

50. Museum Accreditation - Review of Last Period of Submission (2015-19) and Preparations for Next Submission (2022-2026).

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide an update on Museum Accreditation and invite comments on the review of the 2015-2019 activity. The report also sought comments on the review of policies in preparation for the next submission, in particular: the vision and statement of purpose, collection themes and future priority areas and the access policy. A copy of the report marked 'Agenda Item 10', is filed with these minutes.

Arising from discussion and questions, the following points arose:

- (i) There was a number of ways that collections were made accessible to the public for example, most collections were usually displayed on a regular rotation around the various County locations and temporary exhibitions were also programmed in to ensure variety. There was also a search function online called Image Leicestershire which enabled people to search through curated aspects of particular collections and order images should they wish. In terms of whether providing an online Museums' Service had been considered it was confirmed that developing a digital platform to display more content online was a future aim which

was expected to be key in providing service users with a greater level of accessibility. Members supported this approach and encouraged innovative ways to make collections more accessible.

- (ii) The Council worked closely with Leicester City Council and other organisations to ensure collections and displays were not duplicated and to identify joint project opportunities. Work had recently been undertaken by the County and Leicester City Councils to review the collection items held by both authorities to ensure they were correctly situated. Much loaning activity had also taken place between the Leicestershire Museums' Service and other organisations during the reporting period to maximise collection display opportunities and efforts would continue to be made to promote loans going forward. The Thomas Cook collection was another example of partnership working, which was taking place between the County, City and Rutland Councils. The Collection was currently held in Leicestershire's Record Office and the City Council was planning to hold some exhibitions to display the collection items over the summer period.
- (iii) Regarding unprepared archives relating to contracted archaeology and archaeological depositions and whether opportunities could be being missed by the Leicestershire Museums' Service not accepting these, it was confirmed that ensuring finds were properly catalogued and marked was an essential requirement to ensure items were identifiable and fit for use by the Service. For example, as part of planning processes developers were sometimes required to undertake some form of archaeological investigation and prepare the material in advance of deposit with a registered repository (locally this was the Leicestershire Museums' Service). The guidelines for the transfer of archaeological archives to Leicestershire County Council's Museums collections (set out in Appendix A to the report) provided prospective depositors with guidance on the conditions that should be met for finds/archives to be acceptable. The level of preparation required to be made on such finds depended on the types and range of the discoveries which often varied greatly.
- (iv) The Council was working with Charnwood Borough Council to prepare for celebrations to be held in 2021 for the 800th anniversary of Loughborough Fair. A member remarked that the part of the project they had been involved in which was being led by the County Council had been very well organised so far and they had found communication with the officers involved, including those at the Leicestershire Museums' Service, to be positive.

RESOLVED:

- (a) That the activity undertaken by Leicestershire Museums relating to the last Accreditation period (2015-19) set out in Appendices B and C to the report and the update now provided be noted.
- (b) That the Director be requested to consider the comments now made by the Committee as part of the work being undertaken by the Leicestershire Museums' Service to prepare for the re-submission for Accreditation.

51. Framework for Integrated Personalised Care.

The Committee considered a report of the Director of Adults and Communities which provided information and sought comment on the Framework for Integrated Personalised Care, which was intended to supersede the Health and Social Care Protocol (2014). A copy of the report marked 'Agenda Item 11', is filed with these minutes.

Arising from discussion the following points arose:

- (i) In response to a query regarding the proposed governance arrangements and the process for taking decisions quickly for the benefit of service users, the Director confirmed that overall governance arrangements for Leicestershire would be through the Health and Wellbeing Board whose membership included both NHS and County Council representatives. This would therefore provide for decision making to be coordinated between local partner organisations. The Board was also supported by a sub-group, whose membership included key service provider representatives, which took account of decisions made by the Health and Wellbeing Board to ensure these were fed into operational practices. Once the Framework was approved and came into effect it was thought unlikely there would be any disruptions or barriers to how health and care services were delivered to individual service users.
- (ii) The new Framework would build on existing practices and it was expected to improve service delivery outcomes for service users. In terms of how these outcomes would be monitored, the Director advised that bi-weekly meetings already took place between health and care partners across LLR under existing arrangements and these would continue under the new Framework. Members noted that such meetings provided an opportunity for individual cases to be reviewed and care responsibilities and costs apportioned to the appropriate organisation(s).
- (iii) Members noted that a shared care form would be generated for Multi-Disciplinary Team (MDT) staff to consider how to apportion responsibilities and costs between Health and Adult Social Care, and that the Adult Social Care Management System had a funding mechanism built in to support that process. The Director highlighted that staff across the MDTs would work to ensure that services were coordinated effectively so that service users that were entitled to free public healthcare were not charged for healthcare related tasks. This element would also be picked up as part of the service user review process and had been built into delivery and customer expectations service models which would require staff to ask questions to ensure the service being received was efficient and at the level expected.
- (iv) The way costs were budgeted for and apportioned between Health and Care depended on the level of service required. For example, if a person's social care needs could be met by the Council with two calls a day but there were additional health related elements that required a third call these may be included onto the Council's system for an invoice to be issued to charge the relevant NHS Clinical Commissioning Group for the third call. In other cases, it may be that the level of service provided was required to be shared equally between both organisations and therefore costs were apportioned in an equal way.

- (v) Members were assured that staff would continue to receive appropriate training and be assessed for competency for any task they were required to undertake. Currently there were two levels of training that staff in the social care workforce could receive. Training at the first level was provided to all staff members undertaking a role in social care and designed for those carrying out generic tasks. Training at the second level was an enhanced level of training that was designed around individual service user needs to enable staff to carry out specific tasks to support those needs.

RESOLVED:

- (a) That the update on the work undertaken to review the existing Health and Social Care Protocol (2014) and proposals to supersede it with a new Framework for Integrated Personalised Care be noted.
- (b) That the Director be requested to give consideration to the comments now raised.

52. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 7 June 2021 at 2.00pm.

53. Chairman Announcement - Retirement of Lead Member for Adults and Communities.

The Chairman announced that this would be the final meeting of the Adults and Communities Overview and Scrutiny Committee that Mr Richard Blunt CC would be attending and thanked him for his attendance at these meetings and the responses provided to the questions and comments raised.

2.00 – 3.43pm
8 March 2021

CHAIRMAN



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 JUNE 2021

PROVISION OF SHORT BREAKS AND SUPPORTED LIVING SERVICES
REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of this report is to provide the Committee with an update and to seek its views on the consultation on proposed changes to the provision of in-house short breaks services. The report details the outcome of the pre-consultation engagement undertaken with those who access the Smith Crescent Short Breaks Service based at the Cropston Drive site in Coalville, which has been completed in advance of formal the consultation which commenced on 10 May.
2. The Committee is asked to provide comments which can be shared within the report on the outcome of consultation due to be presented to the Cabinet on 20 July 2021.

Policy Framework and Previous Decisions

3. In June 2018, the Cabinet agreed recommendations for long-stay residential services at The Trees in Hinckley continue to be provided subject to reconfiguration and refurbishment of the existing building. It also agreed that a new short breaks service be developed on the Cropston Drive site to replace the existing Smith Crescent short breaks service.
4. On 8 February 2019, the Cabinet approved funding for the 2019/20 to 2022/23 capital programme including £3.7m for the redevelopment of the Smith Crescent/ Cropston Drive site. Plans for the site were subsequently approved by the Cabinet in June 2019.
5. On 8 March 2021, the Committee received a report which outlined proposals for the future use of the Trees Residential Care Home in Hinckley, and development of the site at Cropston Drive in Coalville and confirmed its support for the planned consultation and engagement with those who accessed services on these sites. On 23 March 2021, the Cabinet subsequently agreed that the Director of Adults and Communities be authorised to commence a consultation exercise on the following proposals:
 - i. To close Smith Crescent in Coalville as a place for the provision of short breaks and for short break provision to be provided at the following three locations in Leicestershire - Hinckley, Melton, and Wigston;

- ii. To expand the existing facilities at The Trees in Hinckley for the provision of short breaks taking the total number of beds at the site to 12;
 - iii. To withdraw the current proposals for the development of the Cropston Drive site in Coalville pending the outcome of consultation which would inform revised development proposals for the site.
6. The Cabinet noted that the consultation proposal had changed slightly from that outlined in the report and would now involve initial engagement with the 17 service users who usually access the Smith Crescent Short Breaks Service to ensure that the views of those most affected by the proposals were able to have additional time and input into the overall consultation. The Cabinet also noted that formal consultation would follow in May. A further report is to be submitted to the Cabinet in July 2021 regarding the outcome of the consultation and a proposed way forward.

Background

7. In June 2018, following a consultation on in-house short breaks services in Hinckley and Coalville, proposals to reconfigure the Trees in Hinckley and to develop a replacement Short Breaks facility on the site occupied by Hamilton Court residential care home and Smith Crescent Short Breaks Service (known as the Cropston Drive site) in Coalville were approved. This would have given the Council sufficient short breaks accommodation in the County to meet demand and ensure that the long-stay residents of The Trees would be able to continue residing in that care home following a period of refurbishment. This also resulted in the decommissioning of Hamilton Court residential home, which closed in August 2019.
8. The refurbishment of The Trees was completed in December 2020 at a cost of £1.1m on the basis that the former permanent residents had expressed a wish to return to the home. The refurbished aspect of the building provides accommodation for up to eight individuals with associated communal space and staff accommodation. The Department remained actively involved with residents and their families during their temporary alternative placements. However, following reviews of their care and support needs all those who previously resided at The Trees made the decision to remain in their alternative accommodation.
9. There has also been a failure to achieve an economically viable bid to develop the previously agreed proposals for the Cropston Drive site. This, along with the completed refurbishment of The Trees, and the opportunity to review its intended use formed the basis on which previously agreed decisions have been reviewed.
10. Given that The Trees is not required by former residents and that the existing proposals for the Cropston Drive site cannot be achieved within current funding, a review of the options available has been undertaken. The outcome of the review recommended that extending the Short Breaks Service at The Trees to accommodate 12 service users was the preferred option. This was because the development at The Trees would meet the needs of people that access short breaks, it would provide operational efficiencies, and this model of care followed successful models adopted elsewhere in the County (Melton, Oadby and Wigston).
11. The remodelled facilities at The Trees will provide specialist accommodation for those who currently access the Council's Short Breaks Service and offer an

opportunity to fully utilise existing accommodation that is already available, without the need for further additional investment to develop additional provision. The current and proposed in-house service availability is outlined in the tables below:

Current Service Availability

Carlton Drive, Wigston	7 beds
Melton Short Breaks, Melton	5 beds
The Trees, Hinckley	4 beds
Smith Crescent, Coalville	6 beds
Total	22 beds

Proposed Service Availability

Carlton Drive, Wigston	7 beds
Melton Short Breaks, Melton	5 beds
The Trees, Hinckley	12 beds
Smith Crescent, Coalville	0 beds
Total	24 beds

Pre-consultation Engagement

12. In advance of the launch of the formal consultation, discussions with people who are directly impacted by these proposals have taken place so that their views can be captured in a consistent way. This was also done to ensure that key considerations are captured and can be highlighted separately to the wider consultation responses.
13. Family members/carers of those people who currently use Smith Crescent have been contacted to arrange either a telephone appointment or a face-to-face meeting to discuss the proposals. Face-to-face discussions have been made possible by holding these in a building deemed to be Covid safe by the Council's Health and Safety Team, ensuring appropriate personal protective equipment and social distancing measures were adopted.
14. A total of 15 discussions were held with relatives/carers of people who use Smith Crescent, covering 16 of the 17 people who would usually access the service. Seven took place over the telephone and eight face to face. The family of one person who has previously used Smith Crescent advised that the person they support already accesses The Trees therefore no further engagement was required. The key areas of discussion focussed on:
 - The proposal to close Smith Crescent;
 - The future use of The Trees;
 - How best to engage with those who use Smith Crescent to ensure where possible they can contribute their views to the consultation;
 - If the proposal went ahead, what transitional arrangements would need to be considered for people to access alternative services;
 - Any other feedback or comments that were important to highlight.

15. In respect of the proposal to close Smith Crescent, 73% of relatives/carers disagreed with the proposal and 27% agreed. Views were expressed both in terms of the existing building remaining open, and/or a replacement being built on the existing site.

“This is very sad, Smith’s is close and handy for us.”

“It’s rubbish, we really need it as there is nothing else around here. Don’t let Smith’s shut.”

16. On the future use of The Trees, 53% thought that the refurbished facility should be used for Short Breaks, 40% did not articulate a specific view, and 7% thought that the building should be used for something else.

“It should be used for short breaks. I understand why the Council is doing this.”

“It makes sense to use something that is already there that is currently empty. We did think previously that redeveloping Smith Crescent would be a luxury, but were happy to go with this at the time.”

17. It is important that the views of people who use Smith Crescent are able to be explored as part of the consultation. Discussions with relatives/carers took place as to how engagement could be facilitated with people who use the service. The feedback from these discussions can be summarised as:

- Easy Read questionnaire for the individual to complete independently;
- Support to complete Easy Read questionnaire;
- Unable to engage, even with advocacy or support;
- Would prefer that the proposal is not discussed with person due to the detrimental impact it would have in advance of any formal decisions being made;

18. A sensitive area of discussion focused on what transitional arrangements would need to be in place should the proposal be taken forward. It was reiterated that the proposal was subject to formal consultation and that no decisions have been made. The purpose of the discussion was to understand in more detail the individual circumstances and impact a potential change in service would have. Suggested approaches included:

- The need for short visits during the day for lunch/tea were discussed as was the need for an overnight visit on which to build confidence and trust in an alternative service. 93% of people advised that this should be in place.
- Video tours of the alternatives to be made available and shared – 47% of people would like to have these made available.
- Visits to The Trees and/or the other in-house short breaks services at Melton and Wigston were requested – 67% of people requested these.
- Staff from Smith Crescent to support individual service users as part of their transition.

19. It was important that relatives and carers were able to express their views on the proposals and the impact that this will have on them personally. There was a wide range of feedback, some of which was very individual and very much relevant to the

person they directly support, others can be summarised in a few key themes. These include:

- The importance of a local service for people – 60% of relatives/carers expressed the view that there should continue to be a local service for people in North West Leicestershire/Charnwood.
- The rationale for the proposals – 40% of relatives/carers understood and agreed with the approach the Council was taking.
- Disappointment that a replacement facility was not being built on the site as this had previously been agreed by the Council – 40%.
- Distance/travel time to alternatives – 40% of relatives/carers expressed concern about the journey distance/duration. With half of these extremely concerned about the physical impact the additional distance/travel time would have on their relative and whether this would even be possible.
- The continued need for bookable short breaks services locally – 60% focussed on the importance of having access to bookable short breaks and that this was essential for them to be able to continue in their caring role.
- Praise for the existing staff team at Smith Crescent – there was widespread thanks to the staff team for the excellent service they have provided.

20. Staff at Smith Crescent were also invited to participate in pre-engagement discussions. Nine members of staff attended face-to-face discussions, with a further two members of staff holding telephone meetings. Feedback can be summarised as:

- Recognition of the challenges of the existing building and that this is no longer fit for purpose;
- The proposal makes economic sense;
- An acknowledgement that there has been a clear decline in the use of Smith Crescent over recent years;
- Considerable worry about future job opportunities within the Council should the service close;
- A commitment to be involved in any service user transitions to alternative in-house short breaks services;
- The refurbished facility at The Trees should be used for short breaks.

Consultation

21. The six week formal consultation was launched on 10 May 2021 and is due to end 20 June 2021. The consultation comprises of a document narrating the details of the proposals, alongside a questionnaire. These are available via the Council's website at www.leicestershire.gov.uk/short-break-changes, or by post on request. An Easy Read version has also been produced.

22. The launch of the consultation was communicated directly with relatives of those individuals affected by the proposals, and paper copies of the consultation documents were distributed.

23. The consultation has also been promoted to:

- Employees of Smith Crescent;
- Elected Members;

- Trade Unions;
- Leicester City Council;
- Rutland County Council;
- Local Clinical Commissioning Groups (CCGs)
- Blaby District Council;
- Charnwood Borough Council;
- Oadby and Wigston Borough Council;
- North West Leicestershire District Council;
- Harborough District Council;
- Hinckley and Bosworth Borough Council;
- Melton Borough Council;
- Healthwatch;
- Voluntary Action Leicester;
- General public via social media posts on the Council's Facebook and Twitter platforms.

24. As at 20 May 2021 the Council has received 30 responses to the consultation.
25. The outcome of the consultation will be reported to the Cabinet on 20 July 2021 and a proposed way forward agreed.
26. The Committee is asked to provide comments which will be included within the report on the outcomes of the formal consultation and other engagement activities due to be presented to the Cabinet on 20 July 2021. As there is no Committee meeting scheduled to receive the full responses of the formal consultation prior to the Cabinet meeting, a copy of the Cabinet report will be circulated to all Committee members to enable them to submit further comments directly to the Cabinet.

Resource Implications

27. On the 8 February 2019, the Cabinet approved funding for the 2019/20 to 2022/23 capital programme including £3.7m for the redevelopment of the North West Leicestershire site (Hamilton Court/Smith Crescent – Cropston Drive).
28. Staffing vacancies at Smith Crescent remain on hold whilst the service remains suspended. Existing staff remain temporarily redeployed in response to the pandemic and there is confidence that there are sufficient alternative options for them within the Department, should the service not reopen.
29. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Background papers

- Report to Cabinet: 12 June 2018 – Reconfiguration of In-House Learning Disability Residential Accommodation
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=5181&Ver=4>
- Report to Cabinet: 8 February 2019 – Provisional Medium Term Financial Strategy 2019/2020 to 2022/23
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=5600&Ver=4>

- Report to Cabinet: 25 June 2019 – Re-development of Disability Services in North West Leicestershire
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=5604&Ver=4>
- Report to Adults and Communities Overview and Scrutiny Committee: 8 March 2021 – Provision of Short Breaks and Supported Living Services
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MID=6461#A167201>
- Report to Cabinet: 23 March 2021 - Provision of Short Breaks and Supported Living Services
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=6441&Ver=4>

Circulation under the Local Issues Alert Procedure

30. A copy of this report has been circulated to the following members representing the electoral divisions in North West Leicestershire and Hinckley areas:

Mr Robert Ashman CC
 Mr John Coxon CC
 Mr Tony Gillard CC
 Mr Dan Harrison CC
 Mr Keith Merrie MBE CC
 Mr Trevor Pendleton CC
 Mr Nicholas Rushton CC
 Mr Craig Smith CC
 Mr Richard Allen CC
 Mr Peter Bedford CC
 Mr David Bill MBE CC
 Mr Stuart Bray CC
 Mr Bertie Harrison- Rushton CC
 Mr Ross Hills CC
 Mr Michael Mullaney CC
 Mr Ozzy O'Shea JP CC
 Mrs Amanda Wright CC

Equality and Human Rights Implications

31. An Equality and Human Rights Impact Assessment (EHRIA) screening document has been completed in relation to the consultation. The EHRIA has yet to be commented on by the Departmental Equalities Group, however a verbal update will be provided to the Committee at the meeting. It concluded that the recommendations should have a neutral impact on the services.
32. A further EHRIA will be produced following the consultation and presented alongside the Cabinet report on a proposed way forward.

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 JUNE 2021

UNISON'S ETHICAL CARE (HOME CARE) AND
RESIDENTIAL CARE CHARTERS

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of the report is to provide information to the Committee on the implications of signing up to Unison's Ethical Care (Home Care) Charter and Residential Care Charter for the commissioning of care services.

Policy Framework and Previous Decisions

2. The Care Act 2014 requires the Council to promote and monitor quality in adult social care services being provided by individual organisations and also the marketplace as a whole, including action to encourage local providers to develop a skilled and valued workforce.
3. The Council's Strategic Plan, and the Adults and Communities Department Strategy 2020-24 which sets out the aim to ensure that the services delivered meet the eligible needs of the citizens of Leicestershire to maximise their opportunities and wellbeing and promote wellbeing, underpin the Council's responsibilities relating to improving the capacity and capability of the workforce.
4. At its meeting on 2 December 2020, in response to a Motion relating to the terms and conditions of care workers, the County Council noted that officers were looking at the implications of signing up to the Unison's Ethical Care (Home Care) and Residential Care Charters and that this work would include:
 - engagement with providers and other stakeholders;
 - identifying if and how elements of the Charters can be included in any future publicly available service delivery processes and contract conditions; and
 - a report to Members setting out the viability of signing up to the Charters.
5. The full County Council noted that should the cost involved in signing up to the Charters exceed the Council's ability to fund the commitment, the Council pledges to campaign actively for the Government to provide the increased funding needed, to create a level playing field and the highest standards possible for adult social care.
6. On 8 March 2021 a report was presented to the Committee on Care Home Sustainability which included details of the initial work undertaken by officers to consider the implications of the Council signing up to the Ethical Care (Home Care) and Residential Care Charters.

Background

7. The objective behind the Unison Care Charters is to establish a minimum baseline for the safety, quality and dignity of care provided to service users by developing more equitable terms and conditions offered to care workers in both home care and residential settings. There are two corresponding Charters:
 - The Ethical Care Charter for home care, referred to throughout this report as the Ethical Care (Home Care) Charter;
 - The Residential Care Charter.
8. The adoption of the principles set out in the Charters would demonstrate a commitment to sustaining fair pay and conditions for the care workforce which research has evidenced can have a positive correlation with the quality of care provided.
9. The Charters contain guidance for councils and other providers on adoption and these give a useful starting point to both recognise what is already in place, and to create the conditions to identify areas for development.
10. The Charters could provide the Council with an opportunity to promote better recruitment and retention within the Leicestershire adult social care workforce. Data from Skills for Care shows that for home care providers within Leicestershire's Care Quality Commission (CQC) registered non-residential care services, there is a 53.4% turnover rate, compared to 31% nationally, and 40% of leavers exit the sector altogether. Non-residential care services also have a very high proportion of zero hour contracts at 60%. This provides evidence that capacity challenges which can occur within the home care sector might be affected by terms and conditions of the workforce.
11. The same source shows that for CQC registered care homes, the turnover is lower at 27.8%, with 28% of leavers exiting the sector and only 8% on zero hours contracts, compared to the national average of 9%.
12. There are significant challenges in CQC registered nursing homes with a high turnover of staff (45.3%), 66% of which leave the sector altogether; 2% are on zero hours contracts. This suggests that capacity issues here relate more to conditions, leadership and development of the workforce.
13. It should be noted that the data above pre-dates Covid-19. Longer-term impacts of the pandemic on the workforce are yet to be determined.
14. Affluence and rurality affect recruitment and turnover, as well as development opportunities and the terms and conditions of employment of the workforce compared to other sectors.
15. Consideration of the impact that the Charters (if adopted) would have on the Council's own workforce beyond the care arena would need to be undertaken to appraise the full implications to the Council. This is not necessarily a straightforward exercise, as the structure of benefits packages vary significantly between those already provided by the Council and those proposed in the Charters, for example, the Local Government Pension Scheme, favourable leave, and sickness arrangements.

16. It is also worth noting that the Care Charters and Real Living Wage are set by organisations that the County Council has no influence over, and they do not have to take into account the wider implications on the County Council such as affordability. This would be a key consideration in any future adoption.

The Ethical Care (Home Care) Charter

17. The Ethical Care (Home Care) Charter is phased, to allow for staged implementation. The Council currently meets the stage one requirements covering areas such as commissioning visits based on client need and allocating appropriate times per visits. The later phases require engagement with providers and an understanding of impact on the Council and its finances.
18. As the Committee will be aware, the Council (with East Leicestershire and Rutland Clinical Commissioning Group and West Leicestershire Clinical Commissioning Group) is currently out to tender for a Home Care for Leicestershire (HCL) service, to begin on 1 November 2021.
19. The tender specification which forms part of the current procurement of the HCL service embeds many of the features of the Ethical Care (Home Care) Charter. Several elements of the Charter represent good employment practice and their adoption would contribute towards the development of the home care market in Leicestershire. However, it should be acknowledged that some requirements would be a significant operational challenge to some providers, and a mandated Charter may cause them difficulties. These unknown impacts on providers emphasise the importance of good engagement in assessing whether or not to adopt the Charter.
20. The Council is committed to the delivery of high-quality adult social care services and health care services within home care for eligible residents of Leicestershire. Bidders for HCL are required to demonstrate how they would deliver services which focus on people's health, safety, enablement, progression, and wellbeing; the services people receive should maximise their independence and provide value for money.
21. Leicestershire's approach to commissioning home care services is shifting focus from time and task activities, to person-centred care planning and flexible service delivery. Building and maintaining positive relationships with home care providers, who are such a key part of the integrated health and care system, is an essential part of this approach.
22. The HCL specification identifies that the market for home care services remains challenging in terms of recruiting and retaining the workforce, ongoing quality assurance and maintaining financial sustainability for the medium term. The County Council remains committed to working collaboratively with providers to develop strategies to address these and future challenges, such as the adoption of the principles of the Ethical Care (Home Care) Charter, with the aim of creating and sustaining fair pay and conditions for the care workforce. Research has evidenced that this can have a positive correlation with the quality of care provided.
23. In accordance with the Council's social value policy, home care providers must work with the Authority to enhance the social value associated with the service in terms of sustainable employment and investment in the workforce. Providers must consider the employment needs within their local community when recruiting and selecting

staff and as such must consider how their recruitment processes support the local economy.

24. To make progress toward improving the market, providers are required to commit to working with the Council to improve employment practices over the course of the HCL framework period as part of a staged implementation. This will allow the implications of changes on providers to be understood, particularly for those businesses that deliver a significant amount of care outside of the framework.
25. The indicative approach to exploring the employment practices recommended through the Ethical Care (Home Care) Charter principles are given below and will be confirmed during engagement with HCL providers:

Stage 1 (Framework Agreement and/or statutory requirements)

26. The Stage 1 requirements include:
 - a) People in receipt of care will be allocated the same homecare worker(s) wherever possible.
 - b) Providers to ensure that appropriate worker time is allocated to meet the needs of people using the service and have sufficient time to talk to clients and provide appropriate care.
 - c) Providers have a clear and accountable procedure for following up staff concerns about people in receipt of care services.
 - d) All home care professionals will be regularly trained to the necessary standard to provide a good service.
 - e) Home care professionals are paid for travel time and travel costs.
 - f) Eligible workers are paid statutory sick pay.

Stage 2 (years 2 and 3 of the Framework Agreement)

27. The Stage 2 requirements include:
 - a) Home care professionals will be given the opportunity to regularly meet co-workers to share best practice and limit their isolation.
 - b) The Charter states that: Zero hours contracts will not be used in place of permanent contracts.
 - c) Working with providers to understand the situations in which zero-hour contracts are being used, their impact on recruitment and retention. Considering jointly where they can be replaced by alternative employment terms, such as permanent or minimum hours' contracts, before setting a target of percentage of workers on zero hours' contracts, that is sustainable for the local market.
 - d) The Charter recommends that: All home care professionals will be covered by an occupational sick pay scheme to ensure that staff do not feel pressurised to work when they are ill in order to protect the welfare of their vulnerable clients.
 - e) Working with providers to understand the financial, contractual, and operational implications, for providers and the Council, of implementing this standard by year three of the Framework Agreement.
28. Key Performance Indicators for Stage 1 of the Charter have been included in the Framework Agreement as follows:

- People in receipt of care will be allocated the same homecare worker(s) wherever possible.
 - Providers will ensure that appropriate worker time is allocated to meet the needs of people using the service and have sufficient time to talk to clients and provide appropriate care.
 - Providers have a clear and accountable procedure for following up staff concerns about people in receipt of care services.
 - All home care workers will be regularly trained to the necessary standard to provide a good service.
 - Workers are paid for travel time and travel costs.
 - Eligible workers are paid statutory sick pay.
29. The monitoring method will be determined on discussion with providers and specialist internal teams such as the Council's quality, contracts and audit functions.
30. It should be noted that this Charter may have wider applicability to supported living and extra care, and this will be considered as part of the Council's research into the appropriateness of adoption.

Residential Care Charter

31. Like the Ethical Care (Home Care) Charter, the focus of the Residential Care Charter is to create the environment for higher standards of care across all residential settings, by supporting fair and safe working pay and conditions for workers in the sector.
32. The Residential Care Charter is set out over the following themes: Protecting and Supporting Residents, Training and Support for Employees, Decent Pay for Quality Work, and Time to Work.
33. As such, the Charter contains many of the same commitments around the Real Living Wage, zero hours contracts, appropriate training in works time and occupational sick pay as that of the Ethical Care (Home Care) Charter.
34. Residential care for adults is the Council's biggest budget and as such a thorough assessment will need to be made before adoption could be considered.
35. The requirements of the Residential Care Charter are outlined concisely on the Unison website at <http://www.savecarenow.org.uk/read-the-residential-care-charter>.

Proposals

36. As noted above, the current procurement of home care seeks a commitment from providers to work with the Council to improve employment practices in a staged approach. This includes several of the requirements in the Ethical Care (Home Care) Charter.
37. Further work and engagement with the residential care market will need to take place in order to understand the changes required to improve employment practices, and the associated benefits, in that market.

38. Work will also be undertaken to determine the approach to be taken for other care provision, and other services delivered by the Council.
39. There is the potential to create a differential approach to different sectors of the care market. However, this can be viewed as being in line with the Council's strategy and vision for adult social care which is to promote people's independence by supporting people in their own homes wherever possible. The single biggest limiting factor in providing people with support at home is the capacity and capability of the workforce. If the improvement of employment standards results in a shift of workforce toward home care, then the Council will be shaping the market to achieve its strategic ambition.

Consultation

40. Further discussions will take place with a number of councils who have adopted the Charters to understand the implications and the most effective ways of engaging with markets on its adoption.

Resource Implications

Procurement implications

41. The current HCL procurement seeks a commitment from providers to work with the Council to improve employment practices in a staged approach, including requirements in the Ethical Care (Home Care) Charter.

Finance

42. A move towards achieving the ambitions of the Ethical Care (Home Care) Charter is expected to have a lower cost than the Residential Care Charter. The new pricing for HCL has been set at a sufficient level to allow for a number of the elements of the Charter to be incorporated. However, until it is understood how providers would adapt their business to implement the change in employment practices the overall impact cannot be quantified.
43. However, the adoption of the Real Living Wage alone might have an indicative impact on the residential care budget of an increase of c.5% excluding any inflationary increases. This would mean a £5 million increase to the residential care budget of £100 million from the first year of adoption.
44. The Medium Term Financial Strategy (MTFS) for 2021-24 does not include funding for adoption of the Residential Care Charter. With a significant shortfall in revenue budget predicted, additional costs will result in the need for additional savings in other services unless government reform is forthcoming. Further work would be required to fully understand the full financial impact from the provider point of view, and again the Council would seek a commitment from the residential provider market to work with the Authority to explore how a staged approach might be implemented.
45. It is proposed to consider these issues as part of the planning for the Residential Fee Review which will begin in summer 2021.

46. Implication for the wider market (self-funders, Direct Payment recipients, NHS etc) requires further research.
47. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Timetable for Decisions

48. The HCL procurement requires bidders to work with the Council in the development of employment practices.
49. Members will be kept informed of developments as appropriate.

Conclusions

50. The Unison Care Charters present the Council with helpful considerations to work with adult social care providers to develop terms and conditions for the workforce, and in turn, the quality of care and the sustainability of the market.

Background papers

- Unison's Ethical Care (Home Care) Charter - <http://www.savecarenow.org.uk/ethical-care-charter#>
- [Unison's Residential Care Charter - http://www.savecarenow.org.uk/read-the-residential-care-charter](http://www.savecarenow.org.uk/read-the-residential-care-charter)
- [Leicestershire County Council Strategic Plan 2018-22](#)
- [Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24](#)
- Care Homes Motion to County Council on 2 December 2020 – <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=134&MIId=6042&Ver=4>
- Report to Adults and Communities Overview and Scrutiny Committee: 8 March 2021 – Care Home Sustainability – <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MIId=6461&Ver=4>

Circulation under the Local Issues Alert Procedure

51. A copy of this report has been circulated to all members.

Equality and Human Rights Implications

52. The adoption of the Care Charters will potentially have positive impacts on those with protected characteristics within the workforce, and for people supported. An Equality and Human Rights Impact Assessment will be carried out to inform any future report on proposed adoption of the Charters.
53. No negative impacts have been identified.

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 JUNE 2021

VISUAL AND SENSORY IMPAIRMENT SERVICE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of this report is to set out the conclusions of a recent review of the Council's Visual and Sensory Impairment Service, and to seek the Committee's views on the forthcoming procurement for the service ahead of the new contract start date on 1 October 2021.

Policy Framework and Previous Decisions

2. The Care Act 2014 statutory guidance outlines outcomes for individuals, groups and local populations and makes specific references to people with a sensory impairment.
3. Maintenance of a Sight Register is a statutory requirement for Leicestershire County Council. Under Section 77 of the Care Act 2014, local authorities are legally required to establish and maintain a register of sight-impaired and severely sight-impaired adults who are ordinarily resident in their area.
4. The Visual and Sensory Impairment Service is underpinned by the Council's Strategic Plan and the Adults and Communities Department Strategy 2020-24, the latter of which was approved by the Cabinet at its meeting on 18 September 2020. The Strategy sets out the aim to ensure that services delivered meet the eligible needs of the citizens of Leicestershire to maximise their opportunities and wellbeing. The Strategy promotes independence, supporting individuals to remain in their own homes and reducing the need for residential care.
5. The Cabinet considered an update report on a strategic review of the Adults and Communities' preventative services on 1 April 2014, including commissioning options for the Council's secondary prevention offer, leading to the subsequent procurement of the current service.

Background

6. Section 2 of the Care Act 2014 'Preventing, Reducing or Delaying Needs' states that rehabilitation services for people with a visual impairment should not be restricted to six weeks and should remain free of charge. The guidance defines rehabilitation as including daily living skills and mobility training for people with visual impairment. As well as offering this reablement support, the current Visual and Sensory Impairment Service also meets the requirements as set out in the Association of Directors of

Adult Social Services (ADASS) Position Statement on Vision Rehabilitation in the context of personalisation. In summary the statement aims to ensure that blind and partially sighted people remain independent by putting them in control of decisions that affect their lives.

7. Local authorities must ensure information and advice services have due regard to the needs of people with sensory impairments. This includes ensuring websites conform to accessible information standards and people have information in a language that they understand.
8. The Council's current Visual and Sensory Impairment Service is provided by local charity Vista. It has been operating since October 2015 and comprises the following elements:
 - Visual Impairment Rehabilitation Service;
 - Sight Register;
 - Equipment;
 - Deafblind Community Care Assessment Support Service.

Visual Impairment Rehabilitation Service

9. The Visual Impairment Rehabilitation Service is a short-term support service, providing specialist assessment and rehabilitation to individuals with a visual impairment and/or dual sensory loss who are suitable for and would benefit from a period of rehabilitation. Rehabilitation is provided irrespective of an individual's eligibility for social care services or inclusion on the Sight Register. It is for individuals and their families or carers who are newly diagnosed with visual impairment and/or dual sensory loss, those who have lived their whole life with reduced sight loss or those who are deafblind. This also includes those who experience a change in their vision or their personal circumstances.
10. In order to prevent individuals experiencing a crisis and/or requiring ongoing social care and support services, the provider promotes the benefits of registering visual impairment to potential service users, accessing rehabilitation services and practical support solutions to living and working with visual impairment.
11. The service supports early intervention, prevention and the ongoing support needs of users; it helps avoid isolation and enables individuals to live a healthy life and promotes independence and wellbeing.

Sight Register

12. The Sight Register, the maintenance of which is a statutory requirement, currently shows there are 3,158 people registered within Leicestershire of which 2,945 are adults.

Equipment

13. When a rehabilitation assessment is undertaken by the Visual Impairment Rehabilitation Service, a general assessment to establish whether any equipment is required is also carried out. The main equipment accessed is walking sticks, talking watches, lighting, talking clocks, liquid level indicators, canes and mobility canes.

14. Last year 390 pieces of equipment were issued to service users in accordance with their assessed need, helping to support them in maintaining their independence and therefore reducing and delaying the need for social care services.

Deafblind Community Care Assessment Support Service (DCCAS)

15. The DCCAS identifies and supports appropriate deafblind individuals to access social care service assessments that lead to individuals receiving a personal budget. The service fulfils the County Council's duties under the Care and Support for Deafblind Children and Adults Policy Guidance and the Care Act (2014), including referrals for assessments and facilitating access to qualified interpreters.
16. The annual budget for the service is £166,000, which includes £6,000 for the purchase of equipment.

Service Review

17. The current contract with Vista expires on 30 September 2021. In establishing the service required beyond the contract period, the Council carried out a comprehensive review, considering the performance of the current arrangements, the views of those using the service, benchmarking against other authorities, future requirements including likely demand, and the value of the service.

Service reviews before 2021

18. Light touch service reviews were carried out in 2016/17 and again in 2019 with Public Health partners, which determined that the service was fit for purpose to continue until the end of the maximum contract duration of 30 September 2020.
19. In June 2020, as a response to the unprecedented circumstances relating to Covid-19 pandemic, the contract was extended to 30 September 2021.

Service review 2021

20. Between January and March 2021, the Council carried out a review of the Visual and Sensory Impairment Service, which included consultation with people who use the service, Vista staff, partner organisations, and the Council's adult social care operational and public health teams. Analysis of quality and monitoring data took place in parallel.
21. Approximately 25 people who identified either as a user or carer of the service were involved in the consultation about their service. Lines of enquiry included but were not limited to:
 - How they heard about the service and why they accessed it;
 - Experience of the service they had received and how the provider had evaluated their experience;
 - Options provided in delivery of the service to the person;
 - Equipment received, if any, and whether it was helpful;
 - Support provided and whether it was what the person wanted;
 - Checks on progress or improvements;
 - Raising concerns with the provider and response times;

- Advocacy and future advice;
 - Impact on independence and any isolation previously experienced;
 - Outcomes and unmet outcomes from the service;
22. Key themes from the users and carers in receipt of support from the service demonstrated that advantages included gaining appropriate information and advice about technology, equipment, finances, and benefits. Users indicated that they have become more independent and less isolated since receiving the service. They were informed about groups and clubs available to reduce isolation and there was evidence that people were supported to continue going to work with the interventions through this service.
23. The feedback from the engagement was overwhelmingly positive and suggested that the service provides emotional and practical support which enhanced the user's confidence and independence and gave them choice and control over their lives.
24. Feedback from adult social care operational staff was that most people with sight impairments were referred directly to the service from the Eye Clinic Liaison Officers (ECLOs) at University Hospitals of Leicester. In general individuals require support for their sensory needs rather than requiring social care support. The feedback that was available was positive about the service.
25. The Royal National Institute of Blind People (RNIB) has produced a document '10 Principles of Good Practice in Vision Rehabilitation' which can be considered best practice for people with sight impairments (document accessible via Background Papers). From the service review it can be concluded that the current service meets the principles listed in the document.

Numbers served and outcomes

26. Key data relating to those on the Sight Register, and those who have received interventions from the service, is given in the table below. Not everyone on the Sight Register needs nor has accessed the service.

	2019/2020	2020/2021
Number of people over 18 on the Sight Register	3,474	2,945
Number of People with Partial and Severe Hearing Loss on the Register	1,086	739
Number of people over the age of 18 who have had interventions (from signposting, to provision of equipment or training) within a 12-month period	1,314	2,692
Number of people accessing equipment in a 12-month period. (Adults service only)	447	390

27. As noted above, there are 3,158 people listed on the Sight Register, of which 2,945 are adults. As of the end of April 2021 there were 2,013 clients who had accessed services from Vista (from signposting, to provision of equipment or training) and 353 of these were new referrals within the last quarter.
28. People who are blind or visually impaired are able to obtain a Certification of Visual Impairment (CVI). The rate of new certifications for sight loss in each financial year is

included as an indicator in the Public Health Outcomes Framework (PHOF). Vista records these figures on behalf of the Council within the Sight Register.

29. The numbers of people accessing the service increased in the last financial year during the Covid-19 pandemic. This is despite the number of people attending appointments at Hospital Ophthalmology Departments, where most referrals to the service originate, having declined in that period.
30. From the start of the pandemic in spring 2020, Vista carried out welfare calls to 1,200 people living alone to update them on information and guidance for Covid-19, and to establish whether further support was required. Following this initial work to prioritise those living alone, and to assist with information, equipment and support, the remainder of the those on the Sight Register were also contacted, which generated further referrals.

Review Conclusions

31. The review findings suggests that the service is achieving its objectives, and meeting the Department's model for social care which continues to focus on delivering the right support to the right person, at the right time, in the right place, and by the right partner. It aims to put the person at the centre, and to ensure that the support they receive can deliver the right outcomes and manage any risks appropriately.
32. During the contract period, the Visual and Sensory Impairment Service has supported the Council's strategic aims described in the Adults and Communities Department's Strategy for 2020–2024 'Delivering Wellbeing and Opportunity in Leicestershire'. Residents of Leicestershire have been enabled to achieve the outcomes that matter to them by receiving support delivered in the most cost-effective way and which enables them to live as independently as possible. This approach has been achieved by focusing on individual and community strengths along with a focus on individuals achieving their goals.
33. There are currently 12 people supported by adult social care whose primary long-term support need is listed as 'Sensory Impairment – Support for Visual Impairment'. This suggests that a majority of people with sight impairments are having their needs met within the community without social care support due to the interventions from this service.
34. The 2021 review suggests that the service meets the Council's 'prevent model' to support, promote, and maintain people's independence in the community. The specification for the service from 1 October 2021 will therefore be based on this successful model which has been in place since 2015.
35. It is difficult to carry out a detailed cost analysis for individuals who access this service based on the level and type of interaction. However, it is evident from the review that the service is being provided in an outcome focused way, which flexed to respond to the challenges presented by Covid-19. For the future, the intention is to be able to monitor the rehabilitation or reablement service in terms of outcome journey for an individual.

Future demand

36. The RNIB report that the numbers of people aged 18 and over living with a visual impairment are expected to increase across Leicestershire by 2030. There are expected to be 31,300 people in Leicestershire living with sight loss, which is an increase of 25% from 2021. Future services must take into account the increased demand for services for people with visual and sensory impairment needs.

Visual impairment in Leicestershire

37. The numbers of people in Leicestershire aged 18 and over predicted to have a moderate or severe visual impairment projected between 2025 and 2030 is shown in the table below.

	2025	2030
People aged 18-64 predicted to have a serious visual impairment	286	294
People aged 65-74 predicted to have a moderate or severe visual impairment	4,514	4,435
People aged 75 and over predicted to have a moderate or severe visual impairment	8,668	9,151

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38. According to RNIB, the risk of sight loss increases with age, which is why the population aged 75 and older offers a good indication of the demand for sight loss services. RNIB report that one in five people aged 75 and over are living with sight loss.

Hearing loss in Leicestershire

39. The number of people aged 18 and over predicted to have some, or severe hearing loss projected between 2025 and 2030 is shown in the table below.

	2025	2030
Total population aged 18 and over predicted to have some hearing loss	145,722	159,220
Population aged 65 + and over predicted to have severe hearing loss	12,852	15,409
Total population aged 18 and over predicted to have severe hearing loss	15,642	18,231

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40. Using the data available, it suggests the demand for these specialised services will increase overall. The service from 1 October 2021 must be able to meet future service requirements and demand.

Future procurement

41. Based on the service review and understanding of the requirement from the service going forward, the proposal is to retain the key elements of the current service specification.
42. Therefore, the specification for the service from 1 October 2021 will be strongly based on the successful model which has been in place since 2015.
43. Similar to the last procurement of the current Visual and Sensory Impairment Service in 2015 and based on research into market appetite from this review, the suggestion is that there continues to be limited market interest in providing this specialist service. This presents a risk either that there may be no bidder at all, or in the event of very limited interest, that the Council will need to seek assurances of the value for money of any bid.

Resource Implications

44. The budget for the service will be £160,000 per year with an additional amount of £6,000 for the provision of specialist equipment. This is the same annual budget as that allocated for the last contract. Bidders will need to demonstrate how they can achieve the best outcomes for people against the service specification within this financial envelope, whilst bearing in mind a context of increasing demand.
45. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Timetable for Decisions

46. Work has begun in preparation for the reprocurement of the service with the new contract to start on 1 October 2021.

Recommendation

47. The Committee is asked to comment on the proposal that the forthcoming service specification be based on the model currently in place and make any further considerations ahead of the procurement.

Background papers

- [Leicestershire County Council Strategic Plan 2018-22](#)
- [Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24](#)
Report to the Cabinet: 1 April 2014 – Strategic Review of Preventative Services in Leicestershire –
<http://politics.leics.gov.uk/ieListDocuments.aspx?CIId=135&MIId=3989&Ver=4>
- RNIB – Supporting people with Sight Loss: 10 Principles of Good Practice in Vision Rehabilitation -
<https://www.rnib.org.uk/sites/default/files/10%20principles%20of%20Good%20Practice%20in%20Vision%20Rehabilitation.pdf>
- ADASS Position Statement on Vision Rehabilitation (<https://www.adass.org.uk/adass-position-statement-on-vision-rehabilitation-may-2016>)

Circulation under the Local Issues Alert Procedure

48. None.

Equality and Human Rights Implications

49. Equalities and Human Rights requirements have been incorporated into the existing contract and will also be applied to the new service.
50. An Equality and Human Rights Impact Assessment (EHRIA) screening has been carried out to assess the equality and human rights implications for any proposed changed elements of the service arising from the procurement. No negative EHRIA impacts are anticipated from the new proposed contract.

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 JUNE 2021

PROCUREMENT OF COMMUNITY LIFE CHOICES SERVICES

REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the Report

1. The purpose of this report is to present to the Committee proposals for the future delivery of community life choices (CLC) services in Leicestershire. This includes the timescales for the procurement of commissioned CLC services and proposals for the future delivery of in-house CLC services. It is intended that these proposals will be considered by the Cabinet at its meeting on 22 June 2021.

Policy Framework and Previous Decisions

2. The proposals in this report directly link to the “Working Together for the Benefit of Everyone: Leicestershire County Council’s Strategic Plan 2018-22” and in particular, the strategic outcomes of Wellbeing and Opportunity and Keeping People Safe. The proposals are also integral to the delivery of the ambitions for Adult Social Care which are detailed in the Delivering Wellbeing and Opportunity in Leicestershire Adults and Communities Department Ambitions and Strategy for 2020–2024.
3. The Care Act 2014 gives the Council responsibility for ensuring there is a wide range of good quality care and support services available for people to choose from. Emphasis is placed on the importance of enabling adults with needs for care and support and carers with needs and support, where they wish to do so, to participate in work, education or training.
4. As part of the development of the previous Community Life Choices Framework, reports were presented to this Committee on 6 September 2016 and the Cabinet on 11 October 2016. These reports outlined the proposals for the new model to deliver CLC services and the results of a customer engagement exercise which was undertaken to inform the proposals. There was a subsequent paper to the Committee on 1 November 2016 to provide further information which addressed some concerns regarding the changes which were being proposed in the Cabinet report dated 11 October 2016.

Background

5. Leicestershire County Council operates a commissioning framework for the provision of day services known as CLC, which allows service users choice of provision from a selection of pre-approved providers. The previous change to this commissioning process was in January 2017 with the implementation of a framework agreement which reduced the pool of providers from 73 down to 24 and introduced set payment bands. This contract is due to end on 30 November 2021.

6. In addition to the Framework, there are also currently 10 building-based day services provided in-house. The Council's Direct Services function provides a mix of CLC services. These are either within a group or one-to-one setting delivered either from building-based or community services as half or full day sessions depending on the customer's assessed need. The Council's in-house CLC services currently employ 71 FTE staff across CLC locations in Leicestershire.

The Impact of the Covid-19 pandemic

7. In March 2020, the Covid-19 lockdown meant that providers had to close their building-based services, except for those at highest risk, and adapt their services to deliver support remotely.
8. The Council's CLC providers were creative and flexible in delivering support and examples of how services were adapted included:
- Supporting people to go on walks;
 - Delivering classes/sessions through Zoom, including exercise and cookery classes;
 - Sending out tailored activity packs, such as craft kits, often linked in with Zoom sessions;
 - Using Facetime or similar to keep in touch with people who use services, such as providing tours of a farm for workmates employed at an agricultural service.
9. In common with those receiving an externally provided service, all in-house CLC services were suspended as a result of the first national lockdown.
10. Since the start of the pandemic, the Council has been actively managing all users of CLC services both external and in-house to ensure that customers are receiving the support they need, and risk-assessing those cases to enable a restart of appropriate CLC support that could be delivered in line with government Covid-19 guidance.
11. People using services were given a priority rating based on the level of risk of carer breakdown, crisis or safeguarding issues. This meant people could gradually return to services, starting with those at the highest risk. This process has continued and now 80% of people have returned to services.
12. Social distancing measures mean that most providers have reduced capacity, so people may have returned for fewer sessions than in their original support plan. Some larger providers have invested in additional space or accommodation to enable them to accommodate most people and achieve social distancing. Since restrictions have eased, there has been a significant shift away from the delivery of distant or remote services with only a handful of providers offering this support, and only 29 service users now receiving this type of support.

The Community Life Choices Framework

13. The current CLC framework was designed to focus on promoting people's independence and ensure consistency and equity in service delivery. It is a closed framework, which means no new providers have been able to join since it started in January 2017.

14. A pricing structure was introduced, aligned to banding criteria, which are determined by individual support needs. Spend on the Framework prior to Covid-19 averaged at £111,000 per week. At the height of the lockdown of 2020 for a few weeks, the weekly costs were lower, at £70,000 per week, and due to current Covid-19 restrictions resulting in more one-to-one support to enable access to services, costs are currently £100,000 per week as at the end of March 2021. The actual total spend in 2020/21 was £4.8m. This included an element of Covid-19 support for the market to support vaccinations and other issues. The budget allocated for 2021/22 is £5.8m.
15. The current framework is separated into five lots:

LOT 1	LD	Learning Disability
LOT 2	PD	Physical disability, sensory impairment, acquired brain injury
LOT 3	MH – aged 64 and under	Mental health and memory cognition
LOT 4	MH – aged 65 and over	Mental health and memory cognition
LOT 5	OP – aged 55 and over	Older people (all older individuals with eligible needs)

16. At present there are 535 individuals who access CLC services through the Framework. Approximately 80% of these service users are under the age of 65 and 73% have a primary support need of learning disability. Further detail on the take-up of CLC services are set out in the Appendix to this report.
17. In addition to the services procured through the Framework, an additional 422 individuals purchase day services via their Direct Payment.
18. The current framework was due to end on 30 September 2020. However, as providers were concentrating on re-shaping their service offer to individuals due to lockdown and social distancing restrictions resulting from the Covid-19 pandemic, the procurement was delayed as a supportive measure. Following appropriate consultation with the Director of Law and Governance and the Director of Corporate Resources, a 14-month extension was applied, and the current contract now ends on 30 November 2021.

Proposals for the procurement of CLC Services

19. The Council needs to procure the new CLC service to the timescale below:
- Draft Invitation to Tender (ITT) by mid-July 2021
 - Publish Invitation to Tender 1 August 2021
 - Evaluations 6 September 2021 to 4 October 2021
 - Award and mobilisation 5 October 2021 onwards
 - New service start date 29 November 2021
20. All engagement and consultation with the market and stakeholders will continue until the end of June 2021 in order for the specification to be completed by early July. This will allow the ITT to be published by 1 August 2021. As part of the production of the ITT further discussion will also take place with the market about the payment model.

21. Considerable work has already been undertaken in preparation for the re-procurement of CLC services, including engagement with customers and providers and identifying emerging gaps in the market, such as services for those with physical disabilities and for those with mental health issues. People who use services have highlighted the negative impact of social isolation during the Covid-19 pandemic and their keenness to resume contact with their friends and to return to activities they used to do.
22. Initial engagement has highlighted the need to widen the outcomes within the Framework to include Living Well and Carers and to offer greater flexibility in when services are available. It was suggested that introducing short courses to support the development of specific skills that build independence and support employment and volunteering would be beneficial. Providers expressed concern at the financial implications of the Council not paying for a service when someone is absent, when the absence is at short notice it is not possible to reorganise rotas.
23. It is proposed that the Council takes a relatively light touch approach to the procurement, prioritising any changes to the current specification to reflect key lessons learned during the Covid-19 pandemic.
24. The key changes proposed to the current framework are:
- a) **To move to an open Framework** - this will give the Council the ability to re-open the framework whenever required to address issues such as unmet need or a provider exiting the market.

The Covid-19 pandemic has helped the Council develop stronger links with providers not on the current framework. There are 19 such providers not on the framework which actively engage with the Council and many of these have expressed interest in joining a framework.

As the current framework is closed, newly established providers have not yet had an opportunity to join. An open framework would offer greater choice to people who use the Council's service and more diversity in the market. The framework will have a series of prices for the different types of services delivered (such as zoom classes, 1:1 support, group events).

- b) **To offer a framework contract length of two years with an option to extend for a further two years** - This timescale will allow for detailed work towards the design of the future service. This will ensure that the Council can incorporate lessons learned from the experience of service delivery through the pandemic, and for co-production on the shape of a new service model to be undertaken with service users and the provider market.
- c) **To focus on four key outcomes for the CLC service:**
- the development of skills and confidence for more independent living;
 - maximising health and wellbeing;
 - supporting carers' health and wellbeing including facilitating access to employment, education and training;
 - providing a choice in when and where services are delivered.

- d) **To meet current service gaps** - Opportunities have been identified to develop services for people with physical disabilities, those with profound and multiple learning disabilities, people with autism and those living with dementia. There are particular areas of the County where greater choice could be developed in service provision for working age adults, for example Market Harborough and Lutterworth. There have also been some service closures in the Melton area.
- e) **To provide greater flexibility in when and where services are delivered** - Moving to a seven day and/or evening service for some types of provision, and to reflect the delivery of virtual services where appropriate and agreed with the service user.
- f) **To develop specific short-term support geared towards enablement** - This will promote activities that will help enhance people's independence. A more flexible payment mechanism may be required to encourage providers to offer this targeted short-term support.
- g) **To increase the availability of Personal Assistants** - There will be a separate lot in the procurement to help develop and grow the market for Personal Assistants (who help people with care and support needs to live independently with personal care, household tasks etc).
- h) **To simplify and streamline the contract monitoring framework** - To ensure that the Council only monitors data which evidences key outcomes of the service and enables the voice of people who use services to be heard.
25. It is recognised that there is potential for more significant changes to be made to the CLC service than those proposed for the upcoming procurement, in particular looking at how the Council could move to an approach which focuses more closely on outcomes for individuals. However, this work will require extensive engagement with people who will use the services, their families and/or carers, and the market at large to ensure that the service is effective and capacity sufficient. It is therefore proposed that the service is comprehensively reviewed over the next two years.

In-house Provision

26. There are currently 112 people accessing in-house CLC services across 10 building-based services. Capacity to deliver in-house CLC services to their pre-pandemic level has been severely limited due to Covid-19 restrictions and social distancing requirements. Service user engagement has continued throughout this period but the number of people accessing services can be summarised as follows:
- 29% of people returning to building-based services;
 - 7% of people receiving outreach support into people's homes;
 - 63% of people receiving weekly welfare checks by telephone.
27. Over time the Council's share of the CLC market has been steadily reducing. Consideration is now being given to how best to use the resources available to the Council to deliver the right outcomes for service users.
28. To that end the Council proposes focusing its in-house services on crisis care, short term reablement and enablement, and support for carers through the delivery of a

responsive seven day a week service, and ceasing the provision of long term maintenance CLC support.

29. The pandemic and the upcoming procurement of the CLC framework have expedited the need to consider alternative delivery methods and work is planned to test the external market to establish whether capacity can be developed to meet the needs of people who attend in-house CLC services. Consultation with all current in-house CLC service users will also be needed as detailed below. It is expected that this work will not be concluded by the time the new CLC Framework is live, but flexibility to periodically open the Framework for new providers will accommodate the proposed changes if these are agreed.

Consultation on changes to in-house services

30. It is proposed that a consultation exercise will be undertaken with those who currently access in-house CLC services on the premise of reducing and refocusing the existing in-house service offer to a short term seven day responsive enablement/reablement CLC service from Short Breaks locations. The consultation will run August to October 2021 and seek to identify individual needs and outcomes and use this data to contribute to the development of the new CLC framework, ensuring that the market can offer the type and range of services required to meet needs and achieve outcomes for service users.
31. There are currently 112 people accessing in-house CLC services. Reviews would need to be completed to ensure that the Council meaningfully gains people's views and fully understands the impact of this proposed change and mitigations possible. Advocacy support would be accessed as necessary for service users and their families/carers to ensure that any barriers to engagement are managed.
32. The outcome of the consultation will provide information which will be used to shape and develop the CLC market to ensure they can provide innovative, customer tailored service provision where necessary and ensure that there is sufficient capacity to support the transition of services.
33. Subject to service user feedback and the market being able to provide the type and range of services required, a transitional period would be provided to enable the market to develop and mobilise and provide the least disruption to in-house CLC service users. An indicative timeline for this review and implementation if the proposed changes are adopted is:
- | | |
|------------------------|---------------------------|
| • Review of needs | May to August 2021 |
| • Consultation | August to October 2021 |
| • Transition | from January 2022 onwards |
| • Decommission/closure | from Spring 2022 onwards |
34. Consultation will also be undertaken with the existing staff group employed in in-house CLC services. This will be needed as the proposals seek to establish a responsive seven day service and to align working arrangements with other direct care services delivered in-house.

Resource Implications

35. There will be staff-related resource implications for undertaking the consultation and review of the internal service provision. The framework will be a significant procurement, which may attract a sizeable number of bids, which means the evaluation of the bids will need to be adequately resourced.
36. The current and new CLC Framework (not including in-house provision) is expected to cost approximately £5.8m during 2021/22. It is expected that over the next two years the cost of the new framework may increase from this figure if the service expands to cover more of the services currently provided in-house.
37. The current budget for in-house CLC service provision for 2021/22 is £3m., Further analysis will need to be completed as part of the consultation process to quantify future costs, balancing the cost of inhouse provision against an increase in expenditure on externally provided services.
38. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the contents of this report.

Timetable for Decisions

39. A report will be presented to the Cabinet on 22 June 2021 setting out the proposals outlined and the Committee's views and comments will be incorporated in that report.
40. Subject to agreement of the proposals contained in this report, the outcome of the consultation will be reported back to the Cabinet in autumn 2021.

Conclusions

41. CLC form an important service by helping individuals build positive social relationships, participate in the community, and enjoy good physical and mental wellbeing. Day services also provide an opportunity for respite for carers, decreasing the potential of carer strain.
42. The Cabinet will be asked to agree that the Council goes out to procurement for the CLC Framework on 1 August 2021, to have a new service in place by the end of November 2021. As set out in paragraph 24 of this report, this re-procurement will make improvements to the specification based upon the experiences of running services during Covid-19 and utilise provider and service user feedback. The new contract will run until November 2023, with the option to extend for another two years. During the contract lifetime significant work will take place to review the current CLC service model, move towards an outcome-based approach and potentially shape the market to meet the needs of service users of the internal CLC provision.
43. The proposals for the changes to in-house CLC service provision can be summarised as follows:
 - a) Consult with current in-house CLC service users on the movement to independent sector provision following the implementation of the new CLC Framework.

- b) Conduct reviews for those who currently use in-house CLC services to establish the ongoing requirements for CLC provision.
- c) To consult on reducing in house CLC maintenance packages by transitioning people using them to appropriate independent sector services

Background papers

- Leicestershire County Council Strategic Plan 2018-22
- Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24
- Report to Adults and Communities Overview and Scrutiny Committee: 6 September 2016 - Community Life Choices Framework 2017-20 and Consultation on Future Delivery -
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=4521&Ver=4>
- Report to the Cabinet 11 October 2016 – Community Life Choices Framework 2017-20 – Outcome of Consultation on Future Delivery
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4606&Ver=4>
- Report to Adults and Communities Overview and Scrutiny Committee – 1 November 2016 - Community Life Choices Framework 2017-20 – Outcome of Consultation on Future Delivery -
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=4936&Ver=4>

Circulation under the Local Issues Alert Procedure

44. A copy of this report has been circulated to all members.

Equality and Human Rights Implications

45. An Equality and Human Rights Impact Assessment screening exercise has been undertaken to establish what impacts the proposed changes may have on the cohort of service users currently accessing in-house CLC services. The EHRIA has yet to be commented on by the Departmental Equalities Group, however a verbal update will be provided to the Committee at the meeting. It concluded that the recommendations should have a neutral impact on the services.
45. A further EHRIA will be produced following the consultation and presented alongside the Cabinet report proposals on a proposed way forward.

Appendix

An Analysis of Community Life Choices Provision

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Analysis of Community Life Choices Provision

The Covid-19 pandemic has provided the opportunity to gather more data on services delivered across Leicestershire during the daytime. This includes services delivered through the County Council's framework agreement and those delivered through Direct Payments.

January 2021

Commissioning arrangement	Number	Percentage
Framework provider	874 – managed and Direct Payment	83%
Non-Framework Provider	181	17%
Total services commissioned	1055	(Note: individuals supported will be less as some people attend multiple services)
Managed support	602	57%
Direct Payment	422	40%
Other funding arrangement	31	3%

In addition, there were 112 people supported by Leicestershire County Council inhouse services (some of these people may also attend other CLC services).

Since the introduction of the new framework in 2016 the number of people supported has reduced from 849 in 2015 to 723 in 2019. This reduction has continued through the Covid-19 pandemic, at this point it is impossible to judge whether the numbers supported will return to pre-Covid-19 levels.

Users of day services through the Framework and in-house services

Total	Autumn 2015	March 2019	27 August 2020	12 May 2021
Aged 18-64	561	557	558	522
Aged 65+	288	166	144	127
Total	849	723	702	649

June 2016 Data

Primary Category of Need	Age 18-64	Age 65+	Total No. of People supported
Mental Health	7	64	71
Learning Disability	471	64	535
Physical Disability and Sensory	74	148	222
			828

May 2021 Data

Primary Category of Need	Age 18-64	Age 65+	Total No. of People supported
Mental Health	22	12	34
Learning Disability	434	42	476
Physical Disability and Sensory	66	73	139
			649

The service has always been predominantly used by people with a learning disability and proportion has increased since the introduction of the current framework. With 73% of people using the framework having a primary support need of Learning Disability, compared with 65% in 2016.



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 JUNE 2021

PROVISIONAL PERFORMANCE REPORT 2020/21

JOINT REPORT OF THE CHIEF EXECUTIVE AND
DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of Report

1. The purpose of this report is to present the Committee with an update of the Adults and Communities Department's performance for the year 2020/21.

Policy Framework and Previous Decisions

2. The Adults and Communities Department's performance is reported to the Committee in accordance with the Council's corporate performance management arrangements.

Background

3. The metrics detailed in Appendix A of the report are based on the key performance measures of the Adults and Communities Department for 2020/21. These are reviewed through the annual business planning process to reflect the key priorities of the Department and the Council. The structure of Appendix A is aligned with the Ambitions and Strategy for Adults and Communities Department 2020-2024, '*Delivering Wellbeing and Opportunity in Leicestershire*'. This strategic approach is based on a set of principles with the person at the centre, ensuring the support they receive can deliver the right outcomes. Appendix B outlines the 'layered' model designed to maximise independence – Prevent, Reduce, Delay and Meet needs.
4. Appendix A is also structured in line with the Council's Strategic Plan 2018-22 – *Working Together for the Benefit of Everyone*. This sets out the Council's overall policy framework, approach, and includes a high-level overview of a number of strategies which provide the detail on how the Authority plans to deliver positive change for Leicestershire.
5. The year 2020/21 was the third and final year of a three-year plan for improving the Adult Social Care Outcomes Framework (ASCOF) performance by setting a target for the final year and milestones for the intervening years (2018/19 and 2019/20). The targets for 2020/21 were based on achieving a performance that would either be in the top 25% of councils, or above the average of shire authorities. Targets for heritage, libraries, and adult learning are reviewed annually.
6. Performance figures are classed as provisional at this stage as the source data for the metrics is currently being compiled, with the signed-off version to be published by NHS Digital in the autumn. However, the final performance figures are not expected

to vary greatly from those included in this report and will be presented later in the year alongside national benchmarking.

7. Progress against targets is highlighted using a Red/Amber/Green (RAG) system and Appendix C sets out the description of each category.
8. The ongoing Covid-19 pandemic has impacted many areas of performance during 2020/21, and this is reflected in the commentary throughout the report.

Performance Update: April 2020 to March 2021

9. Appendix A includes four key measures to reflect each of the four layers of the Vision and Strategy. Each of these monitors the proportion of new contacts from people requesting support and what the sequels of these requests were. During 2020/21, there were 25,700 new adult social care contacts, of which 55% resulted in a preventative response, such as universal services or signposting. A further 20% resulted in a response relative to reducing need, such as providing equipment or adaptations; 11% resulted in a response relative to delaying need, i.e. the provision of a reablement service that supports people to relearn the skills required to keep them safe and independent at home. Finally, 14% resulted in a long-term service such as a personal budget. This distribution of contact outcomes differs slightly from previous years, in particular the proportion receiving services (up from 10% in 2019/20 to 14% in 2020/21) due to increased demand as a result of the Covid-19 pandemic.
10. Heritage sites were closed in the spring of 2020 during the first national lockdown in response to the pandemic. Although they began to re-open in September, they were again closed in November and have continued to be closed for the remainder of the performance year. The numbers in Appendix A should therefore be considered with this situation in mind. Through winter and early spring museum and heritage sites have continued to engage with service users in a variety of ways including downloadable family activities over Easter and virtual tours of the Collection Resource Centre.
11. As expected, the restrictions on library services since spring 2020 due to Covid-19 has meant a considerable reduction in activity such as visits and issues, and this is reflected in the year-end figures in Appendix A. One of the outcomes of the varying physical access to libraries has been the increase in e-loans. During 2020/21 these totalled 783,000, an 89% increase on the 414,100 e-loans during the previous year.
12. The digital offer from library services was a key aspect of a large-scale survey recently undertaken and funded by Libraries Connected (a national body representing the heads of local authority library services). From the 20,000 library users who were sent an email (due to Covid-19) 3,500 responded. People were asked how often they used the libraries' digital service pre-pandemic with almost six in 10 saying never. Since Covid-19 restrictions have been in place a third of respondents stated they have used such services as electronic books, newspapers, and magazines. Despite this, additional written answers within the survey highlighted the continued importance of the library as a physical space, providing a place of safety and comfort to interact with others. Furthermore, the majority of respondents highlighted the positive impact visiting a library had on feeling happier (84%), improved wellbeing (77%) and feeling connected (52%).

13. The Leicestershire Adult Learning Service's (LALS) performance relates to the proportion of learning aims due to be completed in a period that were successfully achieved. The current academic year is still ongoing, and performance is currently in line with the 86% target despite a greater number of classes being conducted remotely (online) due to the pandemic which can impact the success rate.
14. Volunteering programmes are a priority for the department in relation to libraries, museums, and heritage services although the necessary response to the Covid-19 pandemic has meant very little volunteering was possible during 2020/21. With regards the pandemic, the Adult Social Care Covid-19 Volunteer Service was in place from early spring 2020 through to August with over 130 volunteers supporting 1,100 referrals. The primary focus of the service was safe and well checks in relation to hospital discharge and shielding whilst other requests included mental health support, befriending, and medication collection. A broad exercise to reflect on the experience resulted in overwhelmingly positive feedback from service users and wider stakeholders alike. As such, work will continue to look at the strengths, opportunities, and challenges of volunteering with potential for a new, more strategic approach in the future.
15. The nature of accommodation for people with learning disabilities has a strong impact on their safety, overall quality of life, and reducing social exclusion. One of the ASCOF indicators monitors the proportion of service users aged 18-64 with a learning disability who are in settled accommodation and not in a care home. Leicestershire performance in 2019/20 was 83%, higher than the national and shire council's average (77% and 74% respectively). Final figures for 2020/21 will be compiled for statutory data returns to central government although the current position shows a small improvement to 84%, slightly short of the 86% target.
16. ASCOF 1E measures the proportion of adults with learning disabilities who are receiving long-term services and are in paid employment. There is a strong link between employment and enhanced quality of life, including evidenced benefits for health and wellbeing. Performance in 2019/20 was 11% and in the top 25% of authorities in England. During the past year, 2020/21, performance dropped marginally to 10.6%, possibly reflecting economic impacts of Covid-19 during the year.
17. Each year local authorities are required to conduct a survey of people in receipt of social care services. A similar survey of carers is required on a biennial basis, and both were due to be undertaken during 2020/21. However, the impact of the pandemic on both people's lives and priorities for local authorities meant the surveys were postponed. The carers survey is now planned to take place in the autumn of this year, closely followed in the winter by the survey of those in receipt of services.
18. Reducing delayed transfers of care from hospital is a national priority and there was a high level of performance in Leicestershire during 2019/20 – those attributable to adult social care were just 0.9 days per 100,000 population, considerably lower than the national average of 3.2. National data publications are the source for delayed transfers of care and were suspended at the outbreak of Covid-19. They have not yet resumed and as such there are no figures for 2020/21.

19. Reablement is a short and intensive service to help people who have experienced deterioration in their health and/or have increased support needs to relearn the skills required to keep them safe and independent at home. As reported to the Committee throughout the last 12 months the proportion with no further services following reablement has fallen during the year highlighting the higher and more complex needs of people discharged from hospital having contracted Covid-19. At year-end performance was 81%, lower than 88% in the previous year although slightly higher than the 80% national average of 2019/20.
20. The metric ASCOF 2B is a key measure in the Better Care Fund and focuses on the whereabouts of people 91 days following hospital discharge and a subsequent period of reablement. Year-end performance for 2020/21 is based on hospital discharges between October and December 2020 and following this period 85% remained living at home 91 days later. This is slightly down from 88% in the previous year. As with the reablement measure discussed in the previous paragraph, the effects of the Covid-19 pandemic will have impacted these outcomes.
21. Avoiding permanent placements in residential or nursing care homes is a good indication of delaying dependency. Research suggests that where possible, people prefer to stay in their own home rather than move into permanent care. For people aged 18-64 performance has been better than the national average during the past four years, more often in the top 25% of authorities. There was further improvement in 2020/21 with the number of permanent admissions (17) a notable reduction from 25 during the previous year.
22. For people aged 65 or over, performance in 2019/20 was better than the national average with admissions falling by 1.8% from the previous year. There has been a further reduction in admissions during 2020/21 – down 13% to 766. This considerable reduction will be due, in part, to a reduced number of admissions through the spring and early summer of 2020 as a result of the initial wave of the Covid-19 pandemic.
23. The County Council remains committed that everyone in receipt of long-term, community-based support should be provided with a personal budget, preferably as a direct payment. The proportion of service users on a personal budget in 2020/21 was 95%, lower than 97% the previous year but higher than the latest national average of 92%. At 99.8% virtually all carers were on a personal budget during 2020/21. In terms of direct payments, 43% of service users and 99% of carers were in receipt of one in 2020/21; performance that should remain higher than the national averages.
24. During 2020/21 there were 5,270 safeguarding alerts received. An alert can include any concern for welfare and will often require a response from the authority, but not necessarily in relation to safeguarding. Once an alert has been investigated into any potential risk of abuse or neglect there may be need for a more in-depth enquiry under section 42 of the Care Act. During 2020/21 there were 700 completed enquiries, a reduction of 20% compared to the previous year.
25. Developing a safeguarding culture that focuses on the personalised outcomes desired by people with care and support needs who may have been abused is a key operational and strategic goal of the Care Act. Of the safeguarding enquiries

completed in 2020/21 where an outcome was expressed, 93% were fully or partially achieved, a similar position to the previous year.

Conclusion

26. As noted in the report, and to be expected, the response to the Covid-19 pandemic has had a considerable impact on performance and activity levels during 2020/21. This has been most notable in metrics relating to libraries and heritage sites although adult social care figures are also affected, in particular the outcomes for people who receive a reablement service.
27. Monitoring and analysis continue on a regular basis and include key metrics relating to the pandemic, along with the more customary performance measures such as those included in ASCOF.
28. Reporting of performance in 2021/22 is currently being established. This will include a review of existing targets in light of the pandemic and will continue to be presented at the Department's monthly Departmental Management Team meetings.

Background papers

- Adult Social Care Outcomes Framework
- Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24
Leicestershire County Council Strategic Plan 2018-22
- Better Care Fund

Circulation under the Local Issues Alert Procedure

29. None.

Equality and Human Rights Implications

30. The Adults and Communities Department supports vulnerable people from all diverse communities in Leicestershire. However, there are no specific equal opportunities implications to note as part of this performance report. Data relating to equalities implications of service changes are assessed as part of Equality and Human Rights Impacts Assessments.

Partnership Working and Associated Issues

31. BCF measures and associated actions are overseen and considered by the Integration Executive and Health and Wellbeing Board.

Appendices

- Appendix A - Adults and Communities Department Performance Dashboard for 2020/21
- Appendix B – Adult Social Care Strategic Approach
- Appendix C – Red/ Amber/Green (RAG) Rating - Explanation of Thresholds

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Adults and Communities Performance 2020/21 April 2020 – March 2021 (Quarter Four)

PREVENT NEED

Leicestershire County Council's Strategic Plan 2018-22	Wellbeing and Opportunity
Supporting Outcome	People are cared for at home, in their own community, whenever possible, and for as long as possible.

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	% of sequels that 'Prevent Need'	Target Band Width	R	56-61%	54.7%	60.9%
ASCOF 3D pt 1	% of SUs who find it easy to find information	H	N/A	73%	No Survey in 2020/21 due to Covid-19 pandemic	61.5%
ASCOF 3D pt 2	% of carers who find it easy to find information	H	N/A	67%	No Survey in 2020/21 due to Covid-19 pandemic	There was no carers' survey in 2019/20

Leicestershire County Council's Strategic Plan 2018-22	Wellbeing and Opportunity
Supporting Outcome	Cultural, historical and natural heritage is enjoyed and conserved

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	Heritage visits	H	N/A	N/A	6.2k	137k

Local	Hours of Volunteering (Heritage and libraries)	H	N/A	N/A	3.1k	25.6k
Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	Library visits (inc. website visits)	H	N/A	N/A	230k	1,065k
Local	All library issues	H	N/A	N/A	1,102k	1,976k
Local	Children's issues	H	N/A	N/A	192k	778k
Local	E-loans	H	N/A	N/A	783k	414k
Local	Total community library issues	N/A	N/A	N/A	58k	335k
Local	Community library children's issues.	N/A	N/A	N/A	27k	186k

Leicestershire County Council's Strategic Plan 2018-22	Strong Economy
Supporting Outcome	Leicestershire has a highly skilled and employable workforce

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	LALS Success Rate	H	G	86%	86.0%	96%

REDUCE NEED

Leicestershire County Council's Strategic Plan 2018-22	Wellbeing and Opportunity
Supporting Outcome	People are cared for at home, in their own community, whenever possible, and for as long as possible.

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	% of sequels that 'Reduce Need'	Target Band Width	G	17-22%	20.3%	16.8%
ASCOF 1I pt 1	% of SUs who had as much social contact as they would like	H	N/A	49%	No Survey in 2020/21 due to Covid-19 pandemic	41.6%
ASCOF 1I pt 2	% of carers who had as much social contact as they would like	H	N/A	36%	No Survey in 2020/21 due to Covid-19 pandemic	There was no carers' survey in 2019/20
ASCOF 1E	% of people with LD in employment	H	R	>11%	10.6%	11.2%

Leicestershire County Council's Strategic Plan 2018-22	Affordable and Quality Homes
Supporting Outcome	There is enough suitable housing to support independence for those with social care needs.

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
ASCOF 1G	% of people with LD in settled accommodation	H	A	86%	84.2%	82.9%

58 DELAY NEED

Leicestershire County Council's Strategic Plan 2018-22	Wellbeing and Opportunity
Supporting Outcome	People are cared for at home, in their own community, whenever possible, and for as long as possible.

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	% of sequels that 'Delay Need'	Target Band Width	G	10-15%	11.2%	12.2%
ASCOF 2C pt 2	Delayed transfers of care attributable to ASC-only	L	N/A	N/A	No data published due to the Covid-19 pandemic	163 days per month
ASCOF 2D	% of people who had no need for ongoing services following reablement	H	R	87%	81.1%	87.5%
ASCOF 2B pt 1 <i>*BCF*</i>	Living at home 91 days after hospital discharge and reablement	H	R	88%	84.9%	88.1%
ASCOF 2A pt 1	Permanent admissions to care (aged 18-64) per 100,000 pop.	L	G	<8.1 (33 Adm's)	4.1 (17 admissions)	5.5 (23 admissions)
ASCOF 2A pt 2 <i>*BCF*</i>	Permanent admissions to care (aged 65+) per 100,000 pop.	L	G	<553 (800 Adm's)	528.7 (766 admissions)	605.7 (880 admissions)

59 MEET NEED

Leicestershire County Council's Strategic Plan 2018-22	Wellbeing and Opportunity
Supporting Outcome	People are cared for at home, in their own community, whenever possible, and for as long as possible.

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	% of sequels that 'Meet need'	Target Band Width	R	6-11%	13.8%	10.1%
ASCOF 1C pt 1a	Adults aged 18+ receiving self-directed support	H	R	99%	95.0%	97.2%
ASCOF 1C pt 2a	Adult aged 18+ receiving direct payments	H	G	>40%	43.4%	47.5%
ASCOF 1C pt 1b	Carers receiving self-directed support	H	G	100%	99.8%	99.8%
ASCOF 1C pt 2b	Carers receiving direct payments	H	R	100%	98.5%	98.4%

Leicestershire County Council's Strategic Plan 2018-22	Keeping People Safe
Supporting Outcome	People at the most risk or in crisis, are protected and supported to keep them safe

Measure	Description	Aim	RAG	2020/21 Target	2020/21 Performance	2019/20 Performance
Local	Of safeguarding enquiries where an outcome was expressed, the percentage partially or fully achieved	H	N/A	N/A	93.2%	92.4%
ASCOF 4B	% of service users who say that services have made them feel safe	H	N/A	90%	No Survey in 2020/21 due to Covid-19 pandemic	89.7%

Key to Columns

Measure	ASCOF	A metric within the national performance framework known as Adult Social Care Outcomes Framework (ASCOF)
	Local	A measure defined and calculated for Leicestershire County Council only
Aim	High	The aim of performance is to be high
	Low	The aim of performance is to be low

Delivering Wellbeing and Opportunity in Leicestershire

Adults and Communities Department, Ambitions and Strategy for 2020 – 2024

Prevent need

We will work with our partners to prevent people developing the need for specialist health and social care support. We will achieve this through information and advice to enable people to benefit from services, facilities or resources that are not focused on particular support needs, but which contribute towards wellbeing and are available for the whole population. Examples include libraries, adult learning services, museums, and associated digital services; green spaces, places of worship, community centres, leisure centres, information and advice services. We will promote wellbeing and work together through active citizenship with families and communities (including local voluntary and community groups). We will help people develop confidence to enable them to speak up and share concerns about their safety and wellbeing.

Reduce need

We will identify those people most at risk of needing social care support in the future and intervene early wherever possible to maintain wellbeing and prevent further need for services (for example people with a new diagnosis of dementia; newly-bereaved; people at risk of isolation; low-level mental health problems; and services for carers). Targeted interventions aim to prevent further needs developing and ensure that people do not become dependent on health and social care. Services might include information and advice, minor adaptations to housing which improve accessibility or provide greater assistance for those at risk of a fall, or telecare services.

Delay need

This focuses on support for people who have experienced a crisis, or who have a defined illness or disability, for example, after a fall or a stroke, following an accident or onset of illness and on minimising the effect of disability or deterioration for people with ongoing conditions, complex needs or caring responsibilities. It includes interventions such as reablement, rehabilitation, and recovery from mental health difficulties. We will work together with the individual, their families and communities, health and housing colleagues to ensure people experience the best outcomes through the most cost-effective support.

Meeting need

The need for local authority funded social care support will be determined once personal and community resources and assets have been identified and fully explored. People with social care needs, assessed as being eligible for funding through the local authority, will be supported through provision of a personal budget. The personal budget may be taken as a direct payment or can be managed by the council. Wherever possible the council will work with people to provide a choice of provision which is suitable to meet people's outcomes, however in all cases the council will ensure that the cost of services provides the best value for money. Whilst choice of provision is important in delivering the outcomes that people want, maintaining people's safety, independence and achieving value for money are the priorities.

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Explanation of RAG Rating

RED	<p>Close monitoring or significant action required. This would normally be triggered by any combination of the following:</p> <ul style="list-style-type: none"> • Performance is currently not meeting the target or set to miss the target by a significant amount. • Actions in place are not believed to be enough to bring performance fully back on track before the end of the target or reporting period. • The issue requires further attention or action
AMBER	<p>Light touch monitoring required. This would normally be triggered by any combination of the following:</p> <ul style="list-style-type: none"> • Performance is currently not meeting the target or set to miss the target by a narrow margin. • There are a set of actions in place that is expected to result in performance coming closer to meeting the target by the end of the target or reporting period. • May flag associated issues, risks and actions to be addressed to ensure performance progresses.
GREEN	<p>No action required. This would normally be triggered when performance is currently meeting the target or on track to meet the target, no significant issues are being flagged up and actions to progress performance are in place.</p>

The degree to which performance is missing a target is open to debate. A common way of overcoming this is to use a precise percentage threshold between current performance and the target. However, a blanket approach (such as plus or minus 10%) is not appropriate due to the varying ways that metrics are reported. E.g. small numbers, rates per capita, percentages.

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