

OVERVIEW AND SCRUTINY BOARD

A meeting of **Overview and Scrutiny Board** will be held on

Wednesday, 15 February 2017

commencing at **5.30 pm**

The meeting will be held in the Meadfoot Room, Town Hall, Castle Circus,
Torquay, TQ1 3DR

Members of the Board

Councillor Lewis (Chairman)

Councillor Barnby
Councillor Bent
Councillor Bye
Councillor Stockman

Councillor Stocks
Councillor Tolchard
Councillor Tyerman
Councillor Doggett

Co-opted Members of the Board

Penny Burnside, Diocese of Exeter

A prosperous and healthy Torbay

For information relating to this meeting or to request a copy in another format or language please contact:

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01803 207063

Email: scrutiny@torbay.gov.uk

OVERVIEW AND SCRUTINY BOARD AGENDA

1. Apologies

To receive apologies for absence, including notifications of any changes to the membership of the Board.

2. Minutes

To confirm as a correct record the minutes of the meeting of the Board held on 25 January 2017.

(Pages 4 - 7)

3. Declarations of Interest

a) To receive declarations of non pecuniary interests in respect of items on this agenda

For reference: Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(Please Note: If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)

4. Urgent Items

To consider any other items that the Chairman decides are urgent.

5. Healthy Torbay Supplementary Planning Document

The Executive Head – Business Services to present the draft Healthy Torbay Supplementary Planning Document.

(Pages 8 - 17)

The Mayor, Deputy Mayor and Executive Lead for Planning, Transport and Housing to answer the Board's questions.

The Board to consider making any recommendation to the Mayor on the draft Supplementary Planning Document as part of the consultation on this Policy Framework document.

6. Strategic Agreement between Torbay and South Devon NHS Foundation Trust and Torbay Council/South Devon and Torbay Clinical Commissioning Group (Pages 18 - 106)

The Director of Adult Services (supported by representatives from Torbay and South Devon NHS Foundation Trust and South Devon and Torbay Clinical Commissioning Group) to present the draft Annual Strategic Agreement.

The Mayor and Executive Lead for Adult Services to answer the Board's questions.

The Board to consider making any recommendation to the Mayor on the draft Agreement as part of the consultation on this Policy Framework document.

7. Transformation project - Generating income through Housing (To Follow)

The Director of Adult Services and Transformation to present the draft report to the Council on the proposal to establish a new wholly owned development company to develop and own homes.

The Mayor and Executive Lead for Planning, Transport and Housing to answer the Board's questions.

The Board to determine if it wishes to make any comments, conclusions or recommendations to the Council.



Minutes of the Overview and Scrutiny Board

25 January 2017

-: Present :-

Councillor Lewis (Chairman)

Councillors Bent, Bye, Cunningham, Darling (S), Stockman, Stocks,
Tolchard and Tyerman

(Also in attendance: The Mayor and Councillors Amil, Brooks, Ellery, Excell, King,
Manning, Mills, Morey, Parrott, Robson and Thomas (D))

50. Apologies

It was reported that, in accordance with the wishes of the Conservative and Liberal Democrat Groups, the membership of the Board had been amended to include Councillors Cunningham and Darling in place of Councillors Barnby and Doggett respectively.

51. Minutes

The minutes of the meetings of the Board held on 30 November and 14 December 2016 were confirmed as a correct record and signed by the Chairman.

52. Urgent Items

The Board considered the items in Minutes 57 and 61, and not included on the agenda, the Chairman being of the opinion that it was urgent by reason of special circumstances i.e. the matter having arisen since the agenda was prepared and it was unreasonable to delay a decision until the next meeting.

53. Improving the quality of care homes provision in Torbay

The Board considered a request from the Mayor that the Overview and Scrutiny Board work with Healthwatch, care home providers and carers to develop a residents charter. This would use Care Quality Commission information on standards and other information to identify what good care homes should look like in Torbay.

Resolved: that the Overview and Scrutiny Leads for Joint Commissioning meet with the Director of Adult Services to determine how the development of a residents charter can best be progressed and report back to a future meeting.

54. Revenue Budget 2016/2017 - Quarter 3 Monitoring

The Board noted the report on the projections in relation to the revenue budget for 2016/2017. It was noted that it was currently predicted that there would be an overspend of £2.2 million primarily as a result of expenditure pressures in both children's and adults social care.

The Director of Adult Services attended the meeting and provided detail of the pressures within the Integrated Care Organisation and the actions which were being undertaken to address them. The Head of Finance highlighted that the current issues in relation to adult social care impacted on the level of risk that was associated with the 2017/2018 revenue budget. He explained that it was hoped that the risk could be mitigated to some extent with the forthcoming budget proposals.

Members of the Board raised concerns that the current pressures within the local health system had not been anticipated and the Director of Adult Services undertook to provide a briefing note to the Board in this regard.

The Board also wished to acknowledge the work which was ongoing within the Joint Operations Team to identify underspends and savings which were being used to offset the overspends within the Joint Commissioning Team.

55. Capital Plan 2016/2017 - Quarter 3 Monitoring

The Board noted the report on the capital expenditure and funding for the current year compared with the last quarter.

The Board asked questions in relation to the replacement CCTV system, South Devon Highway and affordable housing. It was felt that the inclusion of the Investment Fund distorted some of the figures within the report and that consideration should be given to expressing those differently.

(Note: Prior to consideration of the item in Minute 55, Councillor Stocks declared a non-pecuniary interest through running a club from Ellacombe Nursery.)

56. Children's Services Revised Financial Plan

The Executive Lead and Director of Children's Services presented the proposed Children's Services Medium Term Financial Strategy. The objectives of the Strategy included bringing staffing and support costs and placement costs more in line with statistical comparator authorities and aligning activity to reduce expenditure with improvement activity.

The Strategy also aimed to ensure that the Children's Services budget was stabilised to support the transition of the service to an alternative delivery model.

The Strategy included a Financial Improvement Plan covering the period up to 2020/2021. Whilst the Board were comfortable with the figures within the Plan for the next financial year, it was felt that there was still further work to be undertaken to determine whether all of the future years' savings could be delivered.

The proposed Strategy was noted and the Board indicated that it would monitor its implementation on a regular basis.

57. Review of Reserves

The Board considered the report which set out the annual review of reserves. The report highlighted the significant risks facing the Council in 2017/2018 and future years and how it was essential that the Council's reserves provide sufficient contingency to meet the increasing risk.

Resolved: (i) that a task-and-finish group be established to consider the report in detail and make any recommendations to the Council; and

(ii) that the Mayor acknowledges the Chief Finance Officer's statement in relation to the financial challenges that the Council continues to face and is requested to present a revenue budget to the Council which assumes that Council Tax will be increased by a further 1% for Adult Social Care purposes in 2017/2018.

58. Update of Tourism Strategy - English Riviera Destination Management Plan 2016-2021

The Board considered the proposed English Riviera Destination Management Plan which would become the Council's Tourism Strategy (which formed part of the Council's Policy Framework). A task-and-finish group had previously discussed the Plan with the Executive Lead and Executive Head.

Resolved: that the following comments be forwarded to the Executive Lead as part of the consultation on the English Riviera Destination Management Plan:

1. The Plan should make it clear that it is a completely separate piece of work from that being undertaken by the English Riviera Business Improvement District Company (ERBIDCo).
2. However, whilst the Plan explains how it fits within the Council's Policy Framework and with the overarching policies of Devon County Council and the Local Enterprise Partners, the Plan should also be clear on how it fits with the plans and strategies of the Council's private sector partners, in particular the ERBIDCo.
3. The action plan should include the timescales for implementation, the outcomes to be achieved and the resource requirements prior to it being presented to the Council for approval.

(**Note:** Prior to consideration of the item in Minute 58, the Mayor declared a pecuniary interest and withdrew from the meeting.)

59. Exclusion of press and public

Prior to consideration of the items in Minute 60 and 61 the press and public were formally excluded from the meeting on the grounds that the item involved the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972 (as amended).)

60. Torbay Development Agency (TDA) Draft Business Plan

The Board considered the draft Business Plan for the TDA (which formed part of the Council's Policy Framework) and received a presentation from members of the TDA Board.

Resolved: that the proposed TDA Business Plan be supported.

61. Lease of part of the 4th Floor of Tor Hill House, Union Street, Torquay

The Board considered the details of a call-in by at least five Members of the Council of the decision of the Deputy Mayor to grant a 10 year lease to a local media company for the south side of the 4th floor of Tor Hill House, Union Street, Torquay following the vacation of Children's Services from Tor Hill House.

In addressing the Board, the Call-in Promoter highlighted that he believed that the Deputy Mayor's decision was contrary to the Council's Policy Framework. He made reference to the Corporate Plan and Corporate Asset Management Plan both of which made reference to generating income from and making effective use of the Council's buildings.

The Deputy Mayor and other members of the Executive were invited to respond to the points in the call-in and to the questions raised by members of the Board.

Members of the Board indicated that they were minded to agree that the decision was contrary to the Council's Budget and Policy Framework and, at that point, the Monitoring Officer provided advice to the Board.

Resolved: (i) that having listened to the advice of the Monitoring Officer, the Board is of the view that the Deputy Mayor's decision is contrary to the Policy Framework as it does not conform with the Corporate Plan or the Corporate Asset Management Plan and therefore the matter is referred to the Council; and

(ii) that the report to the Council include the views of the Director of Children's Services setting out the risks in relation to the proposed decision, any mitigating actions that he would recommend and whether those mitigating actions would be, in his opinion, sufficient to allow the lease to be granted.

(Note: Prior to consideration of the item in Minute 61, the Mayor declared a pecuniary interest and withdrew from the meeting.)

Chairman

Healthy Torbay Supplementary Planning Document Supporting Information and Impact Assessment

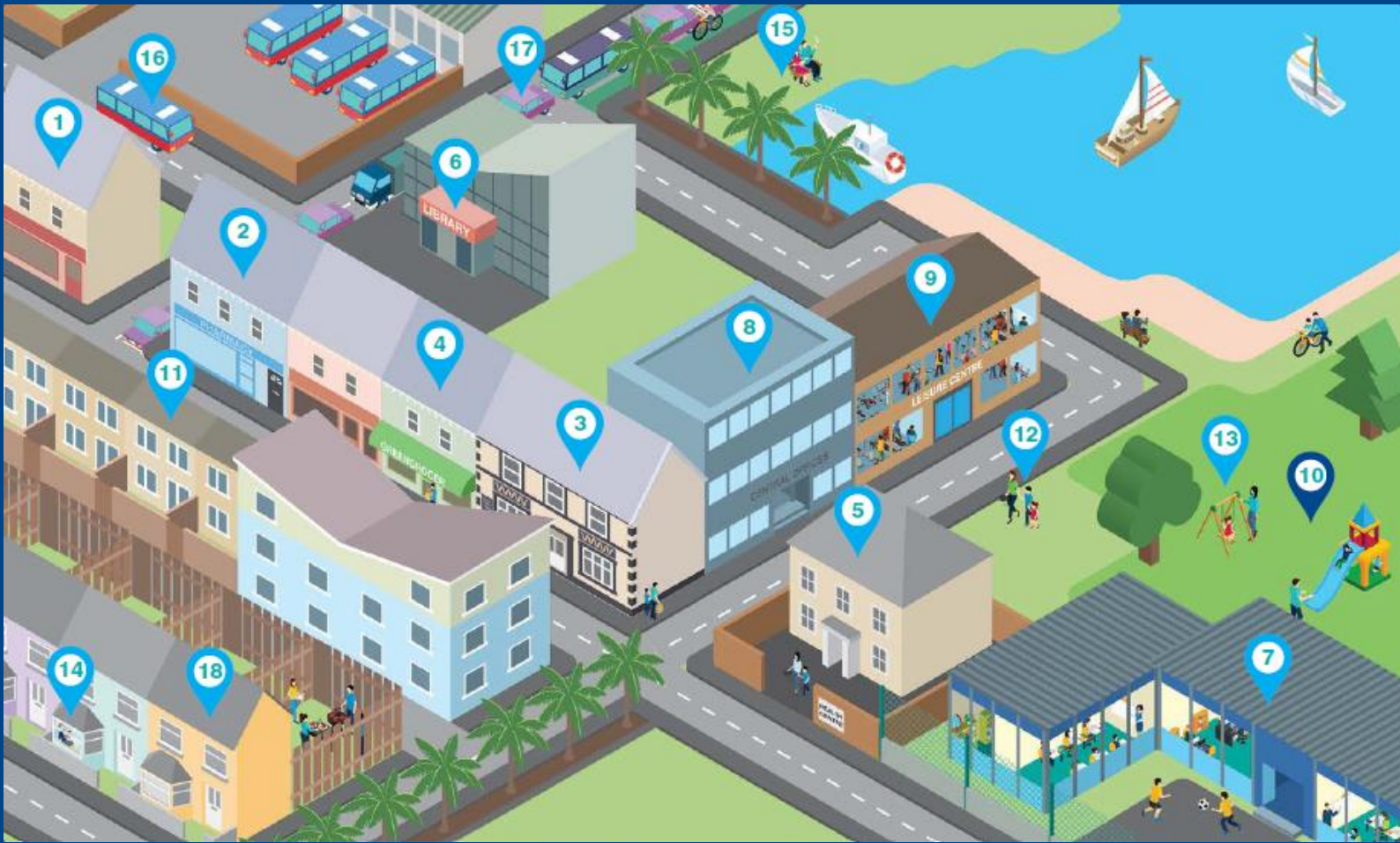
Service / Policy:	Spatial Planning
Executive Lead:	Mark King
Director / Assistant Director:	Kevin Mowat

Version:	1.1	Date:	23/12/16	Author:	Andrew Gunther
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Section 1: Background Information	
1.	<p>What is the proposal / issue?</p> <p>The Council adopted the Torbay Local Plan in December 2015. This document forms the Council’s statutory ‘development plan’ which guides decision-making in respect of planning decisions. As part of the toolkit of planning policy measures available to a local planning authority (LPA) and as enabled by the adoption of the latest Torbay Local Plan, the Council is able to produce and adopt Supplementary Planning Documents (SPD) which add useful detail to the Local Plan policies in order to better secure environmental, social, design and economic objectives which are relevant to the attainment of the development and use of land. Once adopted by the Council (having been through a process of production in accordance with the Town and Country Planning Regulations) SPDs hold legal weight as material considerations in the consideration of planning applications.</p> <p>The Council has produced a number of Supplementary Planning Documents in this regard including most recently the town centre and future growth area Masterplans and is currently progressing a Planning Contributions and Affordable Housing SPD for adoption by Council.</p> <p>Within the Local Plan, the Council has committed to producing SPD’s to further the practical implementation of policies in the Local Plan. Further information in this regards is detailed in the latest version of the Torbay Local Development Scheme (LDS). One of those documents is a ‘Healthy Torbay SPD’ to add further detail on a number of issues relating to the attainment of health and wellbeing through the development management process including health impact assessment (HIA), healthy urban design and green infrastructure, housing and health, healthy food environments and tackling health inequalities.</p>
2.	<p>What is the current situation?</p> <p>Currently the Council has no SPD guidance which expands on the Council’s approach to ensuring new development contributes to improving the health and wellbeing of the community. Although the headline policies in the adopted Torbay Local Plan relating to health and wellbeing (perhaps most obviously SS11 Sustainable Communities and SC1 Healthy Bay) are currently being positively used to guide development towards better health outcomes, the Local Plan is very clear that further guidance on these matters is necessary and will be forthcoming in order to provide certainty to the development industry on the LPA’s requirement’s of development and help guide the production of successful</p>

	<p>planning applications. Furthermore, the local planning authority through the development management process currently draws on the latest evidence on health matters, experience of implementing the Local Plan over the past 12 months and best practice guidance. Drawing these elements together within a formal SPD gives these matters material weight for decision making, provides greater clarity and therefore allows the LPA to better realise development which contributes to better health and wellbeing outcomes.</p>
<p>3.</p>	<p>What options have been considered?</p> <p>The Spatial Planning and Public Health teams have considered a number of options relating to the matter of helping to secure positive health and wellbeing outcomes through the planning process:</p> <p>(i) Produce no further formal guidance in respect of matters relating to health and wellbeing which are referred to in the Local Plan.</p> <p>This option was considered but dismissed. Firstly, there is a need for further guidance in respect of a number of planning policy matters relating to health and wellbeing, this is evidenced through practical experience of implementing the Local Plan over the last 12 months since its adoption in terms of feedback from Development Management staff and the development industry.</p> <p>(ii) Incorporate health and wellbeing guidance under a different form of guidance i.e. not an SPD</p> <p>This option was considered but dismissed. If new guidance is produced the best way to give it material weight for decision-making in the planning process is to adopt it as an SPD. This ensures that it has the best chance of positively influencing development outcomes.</p> <p>(iii) Produce a Healthy Torbay SPD</p> <p>This was the preferred option. Thought has been given to the scope of the document in terms of what policy areas need most attention. The advantage of this document is that it will help to communicate and give a greater profile to the role that the built and natural environment plays as a key wider determinant of health in Torbay. There is a significant evidence base which supports the role of planning in being an important influence on health and wellbeing. The Healthy Torbay SPD will help to holistically identify those opportunities and show how development can help achieve good, local outcomes for health and wellbeing.</p>
<p>4.</p>	<p>How does this proposal support the ambitions, principles and delivery of the Corporate Plan 2015-19?</p> <p>The Healthy Torbay SPD will help to deliver better quality development in Torbay, particularly in respect of health and wellbeing. This document will help achieve a Prosperous and Healthy Torbay particularly through helping the LPA to better address the economic, social and environmental factors (wider determinants) which cause ill health and those which sustain good health.</p>

<p>5.</p>	<p>Who will be affected by this proposal and who do you need to consult with?</p> <p>The Healthy Torbay SPD will apply to and potentially influence (to varying degrees depending on the scale and nature of proposals) all development in Torbay.</p> <p>The whole population of Torbay is potentially affected indirectly or directly by choices which are made through the development management process therefore the consultation must provide the opportunity for anyone who lives, works or carries out business in Torbay to provide their views. Within the population of Torbay there are certain groups and actors who will take keener interest in the matters covered by the SPD, e.g. the development industry, the neighbourhood forums, businesses, the Clinical Commissioning Group, etc. These groups will be identified as part of the consultation process and approached directly for their views.</p>
<p>6.</p>	<p>How will you propose to consult?</p> <p>The consultation requirements for SPDs are specified through the Town and Country Planning Regulations 2012 and this includes 4 weeks of consultation with the public. The Council's adopted Statement of Community Involvement details how the LPA consults on SPDs and includes a range of consultation methods. A 'statement of public participation' is a requirement to be produced alongside an SPD detailing how the LPA consulted with the public, statutory consultees, etc. and how comments from them have been taken on board during the production of the SPD. The LPA has access to a Spatial Planning consultation database of groups, organisations, companies and individuals who have registered their interest to be notified about the production of a Spatial Planning document in Torbay. Additional groups who may be particularly interested, including hard to reach groups will be identified as part of the consultation process for direct contact during the consultation period. 4 weeks of public consultation (23 Jan – 20 Feb) have been identified in the timeline as part of the production of the SPD.</p>



January 2017

Healthy Torbay Supplementary Planning Document (SPD)

Outline

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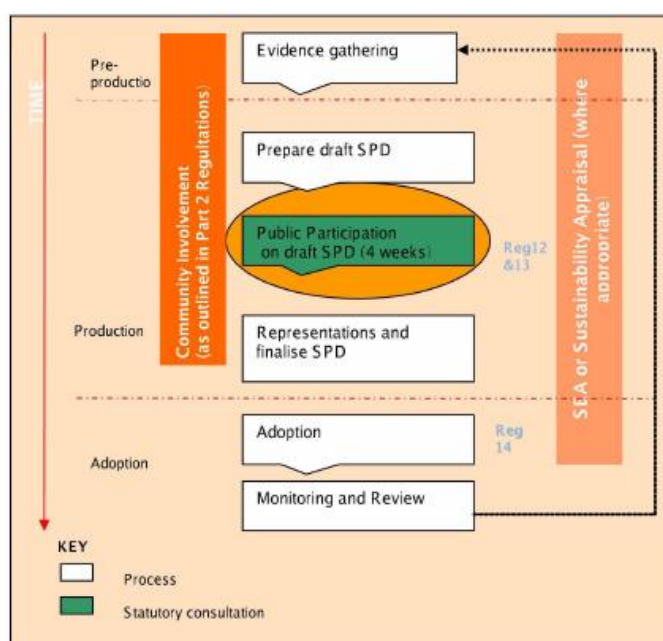
About the Healthy Torbay Supplementary Planning Document (SPD)

Role and purpose of Supplementary Planning Documents (SPDs)

- Supplementary Planning Documents (SPD) can be produced by Local Planning Authorities (LPA) to build upon and provide more detailed advice on the policies contained in a Local Plan. Specifically, they can add detail regarding any environmental, social, design and economic objectives which are relevant to the attainment of the development and use of land as indicated in a Local Plan. The requirements for producing SPDs are set out in Regulations 11 to 16 of the Town and Country Planning Regulations 2012. SPDs should be prepared only where necessary and in line with para 153 of the National Planning Policy Framework (NPPF), i.e. they should help applicants to make successful planning applications and should not be used to add unnecessarily to the financial burdens on development.
- Torbay has a number of adopted SPDs which help the authority to better determine planning applications in accordance with the Torbay Local Plan as well as providing clear advice to the development industry market regarding how to make successful planning applications. SPDs help to support an efficient development management process and encourage positive investment into Torbay through stimulating market confidence. Some examples of adopted SPDs in Torbay include the Torquay and Paignton Town Centre Masterplans SPDs, the Planning Contributions and Affordable Housing SPD and the Greenspace Strategy SPD.

Public consultation and participation

- This draft Healthy Torbay SPD is made available for consultation for a four week period between Monday 23 January and Monday 20 February 2016. Further details of the consultation are available on the Council's website.
- Representations (comments) on the contents of the SPD should be submitted in writing by e-mail to future.planning@torbay.gov.uk or by post to *Spatial Planning, Electric House (2nd Floor), Torquay, TQ1 3DR*. For further information please contact the Spatial Planning office by telephone on 01803 208815.
- The process for SPD production and community participation in Torbay is explained in the Council's *Statement of Community Involvement 2014*. The relevant stages are outlined in the flowchart below:



The Healthy Torbay SPD – relationship to the Torbay Local Plan and national policy

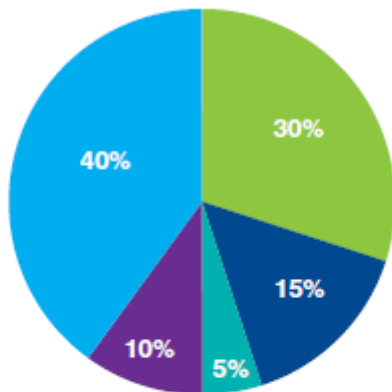
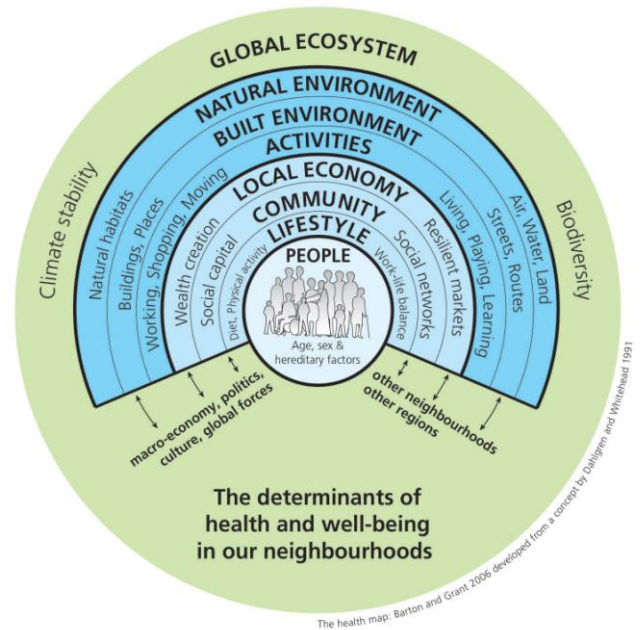
- The Healthy Torbay SPD focuses on issues related to matters of health and wellbeing and how they should be positively addressed through the development planning process in Torbay in the context of building upon and providing more detailed advice and guidance in the adopted Torbay Local Plan.
- The links between Local Plan Policies and the sections of this SPD are indicated in the table below.

The built & natural environment and how it affects health

The wider determinants of health

- The form of the built and natural environment has a large influence on the health and wellbeing of populations.

The impact of planning and development on health



- Genetic predisposition
- Social circumstances
- Environmental exposure
- Healthcare
- Behaviour patterns

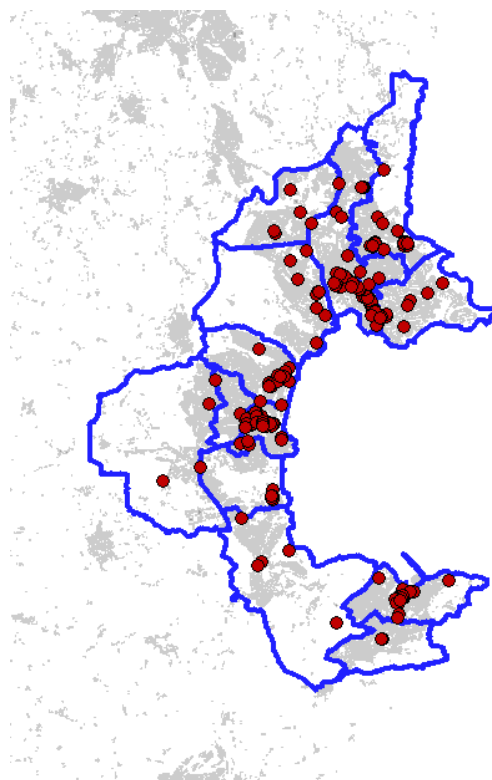
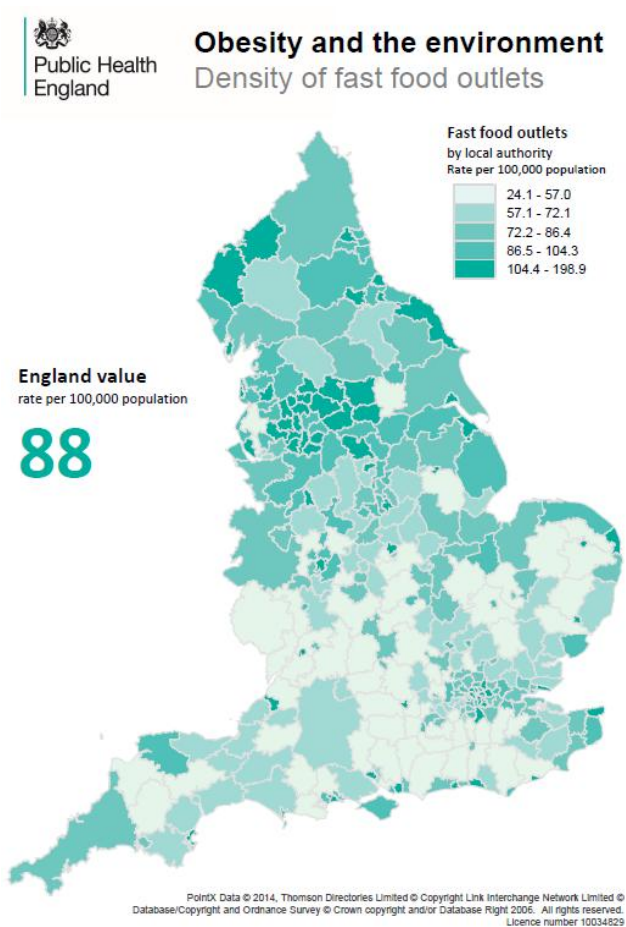
Source: Public Health England (2014). From evidence into action: opportunities to protect and improve the nation's health. Public Health England

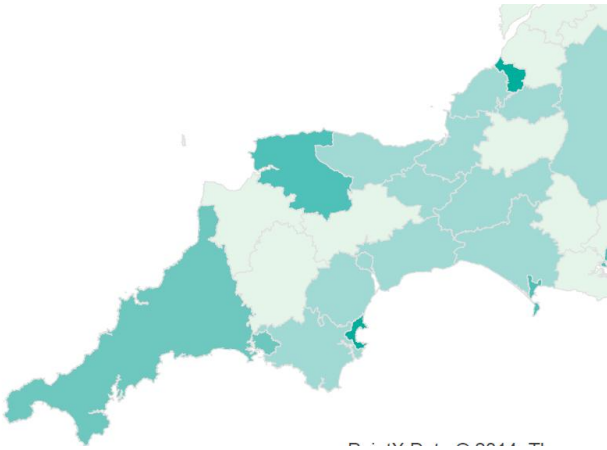
State of health in Torbay

Place-based area health profiles

Healthy food environment

Key facts:





Houses in Multiple Occupation

Healthy Urban Design

Health Impact Assessment

Supporting new models of care

References

- NICE (2008) Physical activity and the environment, Public health guideline [PH8], London: NICE
- NICE (2012) Physical activity: walking and cycling, Public health guideline 41 [PH41], London: NICE
- PHE (2013) Healthy people, healthy places briefing, Obesity and the environment: increasing physical activity and active travel, London
- PHE (2014) Healthy people, healthy places briefing, Obesity and the environment: regulating the growth of fast food outlets, London



Meeting: Council

Date: 23 February 2017

Wards Affected: All

Report Title: Annual Strategic Agreement between Torbay Council, South Devon and Torbay Clinical Commissioning Group and Torbay and South Devon NHS Foundation Trust

Is the decision a key decision? Yes

When does the decision need to be implemented? As soon as possible

Executive Lead Contact Details: Councillor Parrott, Executive Lead for Children's and Adults Services, 01803 293217, julien.parrott@torbay.gov.uk

Supporting Officer Contact Details: Caroline Taylor, Director of Adult Services, 01803 208949, caroline.taylor@torbay.gov.uk

1. Proposal and Introduction

- 1.1 This is the Annual Strategic Agreement (ASA) which sets out the way in which Torbay Council and South Devon and Torbay Clinical Commissioning Group (the CCG) will commission services from Torbay and South Devon NHS Foundation Trust (the Trust). The ASA covers the period 01 April 2017 to 31 March 2018
- 1.2 The report also sets out a proposal to establish an Adult Services and Public Health Monitoring Group whose role will be to provide oversight of the changes in both adult services and public health as a result of local, regional and national pressures.
- 1.3 A significant development is the notice of withdrawal from the Risk Share Agreement that has been served in December 2016 by Torbay and South Devon NHS Foundation Trust. This is covered in the Supporting Information (4).

2. Reason for Proposal

- 2.1 The Annual Strategic Agreement sets out the strategic direction which is designed to maximise choice and independence for those requiring adult social care and support. It sets out the objectives which the Council and the CCG require the Trust to meet and forms the basis on which performance can be monitoring and managed.

- 2.2 The establishment of the Monitoring Group will ensure that there is an opportunity for members to gain an understanding of the issues around adult social care and public health, to review and discuss performance and financial monitoring data and to have oversight of the development of future Agreements given that the ICO has given notice to withdraw from the Risk Share Agreement.
- 2.3 Due to the expiry of the Risk Share Agreement on the 31 December 2017, the approval of the recommendation in respect of the ASA is applicable for the nine (9) months of the financial year beginning 01 April 2017. Negotiations will take place during this period and alternative arrangements will be presented to the council for further approval as appropriate.
- 2.4 The further developments in respect of performance and savings schemes which are presently within the NHS planning cycle, will be presented to council for approval in July 2017
- 2.5 A draft of the Operational Plan is submitted as an Exempt Appendix for context. It is currently in the process of ratification through the NHS governance framework.

3. Recommendation(s) / Proposed Decision

- 3.1 That the Annual Strategic Agreement between Torbay Council, South Devon and Torbay Clinical Commissioning Group and Torbay and South Devon NHS Foundation Trust set out at Appendix 1 to the submitted report be approved for the period to 31 December 2017.
- 3.2 That a Adult Services and Public Health Monitoring Working Party be established comprising 5 members (to be politically balanced), with the Executive Lead for Adults and Children and the Executive Lead for Health and Wellbeing and the Directors of Adult Services and Public Health being invited to attend meetings, with terms of reference as follows:
- (a) To provide strategic political interface between elected members and the Executive Lead for Adults and Children and the Directors of Adult Services and Public Health.
 - (b) To understand the key priorities for Adult Services and Public Health.
 - (c) To be fully briefed on the changes within Adult Services and Public Health especially in respect of the arrangements with the Integrated Care Organisation, changes arising from the Devon-wide Sustainability and Transformation Plan and changes in Government legislation and/or guidance.
 - (d) To understand the financial situation in relation to Adult Services and Public Health.

4. Supporting Information

- 4.1 Torbay and South Devon NHS Foundation Trust has given notice to the Council, and CCG, that it intends to withdraw from the Risk Share Agreement with effect from 1 January 2018.
- 4.2 This is not step which the ICO has taken lightly and the ICO, and other partners, remain committed to finding and securing partnership solutions, which ensure the delivery of joined up, integrated and effective health and care to people living in Torbay. However, the Trust was unable to reconcile the current Risk Share Agreement with the provision and requirements of NHS planning guidance for 2017/18, hence the Trust's decision to give notice.
- 4.3 The Trust, the Council and CCG are committed to working in partnership to renegotiate the RSA, or find an alternative mechanism which delivers similar outcomes but is mutually acceptable to all parties and aligned with national planning guidance for the NHS and the local authority.
- 4.4 As part of this, work is underway to revise savings plans for the coming year in a way which meet the challenges which local services will face in 2017/18 and sets a foundation for 2018/19 and beyond. Because this is work in progress the Trust's Operational Plan has not yet been confirmed by the NHS nationally and is therefore not available for public consideration. A draft of the Plan is available to members as an Exempt Appendix. Whilst there are a series of elements that continue to be developed there is a sound knowledge of activities in relation to Adult Social Care and these are articulated in the attached Annual Strategic Agreement.
- 4.5 A number of place-based, system wide, savings programmes have been developed which are designed to have whole system impact in Torbay (and South Devon). These include:
- Community Services (focusing on the implementation of the new model of care which includes closer and more integrated working between adult social care, community health services and primary care).
 - Placed people (focusing on people placed in care homes whether funded through adult social care or Continuing Health Care).
 - Prevention (focusing on the prevention and self care and reducing reliance on formal health and care services).
 - Market Management (focusing on developing innovative solutions increase capacity and availability in domiciliary, residential and nursing home care services).
- 4.6 The ASA will ultimately form part of the Trust's Operational Plan It is envisaged that the Operational Plan will be presented to Council in July 2017.
- 4.7 In moving forward to renegotiate the Risk Share Agreement, it is important that members have an oversight of both Adult Services and Public Health. It is proposed that a Monitoring Working Party is established to mirror the Children's Services Monitoring Working Party. This will enable a group of members to meet informally to review performance and financial monitoring information. The

Working Party will also be briefed on the changes to Adults Services and Public Health coming through the system as a result of local, regional and national pressures.

4.8 The Working Party will be able to report to the Overview and Scrutiny Board and the Audit Committee as appropriate. The Overview and Scrutiny Board would continue to undertake its statutory health scrutiny duties.

5. Mayor's Response to the comments made by the Overview and Scrutiny Board

5.1 The Overview and Scrutiny Board will consider the draft ASA at its meeting on 15 February at which point it will make recommendations to the Mayor. The Mayor's response to those recommendations will be published ahead of the meeting of the Council.

Appendices

Appendix 1: Annual Strategic Agreement

Exempt Appendix 2: Draft Torbay and South Devon NHS Foundation Trust Operational Plan

Operational Plan Appendix
representing the Annual Strategic
Agreement

Between

**Torbay Council and Torbay and South Devon
NHS Foundation Trust**

For the Delivery of:

Adult Social Care April 2017 to March 2019

V2.4 – 06 February 2017

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1. Introductions

The ASA outlines service development areas within the budget envelope provided the council and outlines elements of the work plan being undertaken by the Trust on behalf of the council, over the two years 2017/18 and 2018/19. Whilst this is under review with the serving of notice by Torbay and South Devon NHS Foundation Trust, it remains the intended direction of travel for all parties.

It specifies roles and responsibilities, and areas of risk. It aligns with the Corporate Plan which sets our aims to support vulnerable adults. Risks remain in respect of the scale of savings required, the stability and sufficiency of the independent sector market, the appetite and acceptance for change in this model of care by the community, the continuing pressures of DOLs (Deprivation of Liberty Safeguards) as well as the impact of operational pressures in the Integrated Care Organisation (ICO).

1.1 Scope of the Agreement

The scope of this agreement is Adult Social Care services provided for the population for which Torbay Council is accountable. This will normally mean people who are resident in Torbay but will also include people placed in accommodation in other areas of the country where national policy dictates that the Council remains the accountable authority.

In addition to the services described in this Agreement, the Trust provides other services, including those commissioned by South Devon and Torbay Clinical Commissioning Group, NHS England specialist, dental and screening teams. These services are described in the contract to which this ASA is appended.

Torbay Council also commissions additional services from the Trust including, the Drug and Alcohol service and the Lifestyles, Health Visiting and School Nursing service which are commissioned by the Council's Public Health team.

This agreement sits within the overall contractual agreement with the ICO between the Torbay and South Devon Clinical Commissioning Group (CCG) and the Torbay Council, It is recognised that should there be a change in contractual arrangements with the Risk Share agreement not being reinstated during the period of notice that an independent agreement between the Council and ICO may need to be created.

1.2 Status of agreement

As at January 2017 this agreement remains in development due to the planning cycles of the NHS changing, the delay in details as to the Better Care Fund and the on-going negotiations in respect of the finances and notice on the risk share agreement in 2017/18.

The statutory duties and obligations in respect of the delivery of Adult Social Care such as meeting the needs of those clients meeting eligibility criteria and those within the Care Act continue to be effective within the scope of this agreement.

1.3 Summary of Services to be provided

The services provided under this agreement will include:

- Provision of information and advice to people enquiring about ASC services;
- Assessment of need for social care services, including the provision of rehabilitation and reablement services, and an Emergency Duty Service;

- Commissioning and monitoring individual packages of care, including case management assessments under the Mental Capacity Act, Deprivation of Liberty safeguarding and engagement in Court proceedings;
- Monitoring of the quality, performance, and cost of services provided by Trust staff and other providers;
- Safeguarding the needs of adults and older people living in Torbay. This includes delivery of Torbay Council's operational safeguarding responsibilities, servicing the Torbay Adult Safeguarding Board, investigations of individual safeguarding concerns and whole homes investigations;
- Ensuring that services are provided in a cost effective way whilst still offering the choice to which people are entitled;
- Collection of income for chargeable services, including and assessment of an individuals' financial circumstances and ensuring that people are receiving any welfare benefits to which they are entitled;
- The collection, collation and submission of activity information and performance returns as required operationally, by the Council and to meet local, regional and national statistical returns;
- The collection, collation and submission of financial returns and budget reports as required operationally, by the Council and to meet local, regional and national statistical returns.
- Benchmarking Torbay council's performance and cost against similar Local Authority areas, England and the South West
- Input to JSNA and housing needs assessment as required to ensure strategic commissioning plans and market management is based on relevant, accurate, quality and timely data
- Procurement and monitoring and management of the local market to ensure sustainable, good quality services
- Delivery of agreed plans including Trust Wide Improvement projects and those agreed through the Better Care Fund including the commitments to optimise the application of the Disabled Facilities Grant (DFG)

2. ASC Commissioning Priorities

The Council's Corporate Plan (2015-2019) includes the following commissioning priorities for 2017-2019. It is the Trust's responsibility to ensure these are underpinned by timely and accurate data collection and information provision including, finance and performance management information on independent and community voluntary sector contracts and service level agreements held by the Trust:

2.1 New Model of Care

- Living Well@Home development programme being a market wide programme in support of the new model of care and move to outcomes based contract
- Implementation of the NHS Standard contract for Care Homes and development of outcomes based contracting options
- Accommodation-based, care and support strategy
- Outcomes based specification for extra care housing and procurement
- Development of a vibrant voluntary and community sector

- Reducing demand through prevention and innovation

2.2 Autism

- Ensure Autism awareness training for all staff that come into contact with people with autism
- Provide specialist training for key staff
- Undertake assessments under the care act for adults
- Delivery of associated actions arising from the Autism Self-Assessment Framework 2016

2.3 Learning Disabilities

- Focus on people living full and independent lives, where secure homes and fulfilling lives are a priority
- We will help people and let them know what options they have to help them achieve their goals
- Improved accessibility to community services for those people who have a learning disability
- Improve access to employment and housing
- Development of Learning Disability Strategy and action plan.

2.4 Mental Health

- Delivery of the improvement plan with Devon Partnership Trust and input to mental health service redesign with Devon Partnership Trust, Devon County Council and South Devon and Torbay Clinical Commissioning Group
-
- Support for integrated personal care planning and brokerage including implementing and embedding systems and processes for identifying resource allocation and extracting data to inform commissioning plans.
- Continue to commission through this agreement delivery of social care funded over 65's Mental Health provision in Torbay.

2.5 Social Care Workforce

- Ensure sufficient professional leadership and support to changes to the workforce and implementation of new ways of working
- Develop capacity within the workforce to deliver the services and provide contingency working and engagement in co-producing new approaches to care work e.g. Trusted Assessor models

2.6 Enhanced working between the commissioning functions

- Developed working arrangements for clarity of roles and responsibilities with the growing independent and voluntary sector
- Supporting engagement with independent and voluntary sector providers through the multi-provider forum and associated groups

2.7 Housing and Care

- Implement the homelessness prevention plan
- Re-commissioning of accommodation based and outreach support for single

homeless and young peoples' homelessness support services and young parents service

- Implement the Devon protocol to support joint action on improving health through housing
- Accommodation-based care and support plan
- Better use of equipment, home improvements, grants and technology including, disabled facilities grant in line with BCF planning
- Homelessness strategy delivery including, prevention and early intervention and alternatives to temporary accommodation and improved hospital discharge

2.8 Safeguarding Adults

- The Trust will Deliver operational safeguarding duty on behalf of Torbay to:
- Prevent abuse and neglect wherever possible, understand the causes of abuse and neglect, and learn from experience
- Ensure all organizations embed learning from incidents and case reviews
- Improve multi-agency practice and processes to improve individual safety planning as part of care and support plans and safeguard adults in a way that supports choice and control and improves their lives
- Provide information and promote public awareness to enable people in the community to be informed so that they know when, and how, to report suspected abuse
- Work with strategic commissioners and in partnerships with independent and community voluntary sector organizations to identify and address issues early preventing escalation through focused service improvement planning to reduce and streamline the number of current safeguarding processes.

3. Current Services

3.1 Activity Assumptions

Due to the timing of the NHS submissions and the democratic processes of the local authority the 31st Dec figures are not available for the initial version submission. These will be updated and included for final papers. For the purposes of context setting the figures relate to activity as of 31st December 2015 and are the basis of activity assumptions applied in the Council planning processes for setting the 2016/17 budget.

Table 1 - Activity Month 6 2016/17

	Mental Health Under 65	Mental Health Over 65	Learning Disability	Adults & Older People		Total
				Torquay	Paignton & Brixham	
Type of Care and Support Plans						
Packages of Care Under £70 per week (at home)	31	14	13	148	125	331
Care Under between £70 & £606 per week (at home)	52	38	215	291	306	902
Care Under £606 per week (Residential based)	35	133	63	144	148	523
Care over £606 per week (at home & residential based)	7	7	136	28	26	204
Full Cost Care (Residential based)	-	28	1	28	38	95
Full Cost Care (at home)	-	9	-	46	59	114
Total	125	229	428	685	702	2,169

3.2 Projected Activity

This is included as part of the Trust's overarching plans and assessment of the impact of their preventative and demand management measures which are presently being calculated. ASCPB will consider the presentation from the Trust in this respect and will also be part of the target setting.

3.3 Activity Baselines and Planning Assumptions

At any one time the Trust will be supporting around 2,200 adults and older people with social needs through the provision of Adult Social Care Services and support funded through the Adult Social Care budgets delegated to the Trust under this Agreement

Delivery is monitored through local operational meetings, the Trust's Community Divisional Board and the Adult Social Care Programme Board against financial run rates and performance targets.

The Trust will operate autonomously to take any management action is necessary to correct performance which can be taken within the parameters of this Agreement. However, should exceptional circumstances arise, through excess demand or other external factors not taken into account when the budget allocations underpinning this agreement were made, the impact and any corrective actions will be discussed through the Adult Social Care Programme Board with advice to the overarching agreements Contract Review Meeting as well as discussion and escalation as necessary to the Risk Share Oversight Group.

The indicators are to be agreed in the light of the December 2016 out-turn figures and the associated funding. Performance indicators for the service will be those set nationally, under the Adult Social Care Outcomes Framework (ASCOF), or agreed locally. A description of the ASCOF indicators is set out in Appendix 1 and includes details of the performance and benchmarking information against each KPI

3.4 Impact on Quality, activity and cost including improvement

The levels of run rate are based upon demand and the legal duties within the Care Act with which the Trust have a legal duty to comply as part of their delegated responsibilities on behalf of the council. As a result and as can be seen from the above tables (though update awaited) there is little impact on the number of people the Trust will be expected to support, aside from the reductions in care home placements.

Consequently although action is necessary to bring run rates back in line with delegated budgets it is expected that the majority of cost improvements will need to be found through one or both of the following ways of reducing the cost of each individual package of care:

- i. Tight adherence to national eligibility criteria and/or
- ii. Finding more innovative ways of meeting peoples' needs which deliver better solutions at lower cost.

To support this approach there have been additional quality assurance processes developed which will continue in 2017/18. The Social Care Quality Report is reviewed and monitored through the Adult Social Care Programme board as one example of the oversight and contract monitoring applied to these elements.

3.5 Adult Social Care Workforce

The provision of integrated health and social care services through local multidisciplinary teams has proved to be an effective model for delivery, able to respond to customer needs swiftly, facilitate rehabilitation and avoid admissions to residential care and hospital where ever possible. However, the existing model relies on a level of staff resources which will not be sustainable in future given the additional demands. An alternative model is being designed which will have an impact on how staff are deployed.

The new care model will be built on a strengths based approach, aligning entirely to the model in use within the voluntary sector and Integrated Personal Commissioning. Adopting this approach across social care, health services and the voluntary sector will bring a synergy of approach not previously seen. For social care this is building upon the previous 'Personalisation Strategy' which was been successful in delivering a change of philosophy from time based and care based provision to outcomes based commissioning.

A social care workforce strategy was published in September 2016, which made a series of key recommendations. The recommendations in this strategy focus on strengthening recruitment, focusing on newly qualified workers and using enhanced media/advertising.

The strategy also looks to strengthen the Social Work Workforce, by creating a Principal Social Worker and specialist clinical roles in order to align Torbay and South Devon to neighbouring authorities. In addition, specialist roles are recommended. These measures will equip the workforce for a more complex workload and offer a career pathway which is not based on management.

In addition, the strategy proposes to address the loss of experienced Social Workers to neighbouring authorities by introducing flexibility within Band 6 to match salaries offered in other peninsula authorities.

3.6 Safeguarding

The Trust will continue to deliver the delegated responsibilities of Torbay Council regarding Safeguarding Adults. The Care Act 2014 put Safeguarding Adults into a statutory framework for the first time from April 2015. This placed a range of responsibilities and duties on the Local Authority with which the Trust will need to comply. This includes requirements in the following areas:

- Duty to carry out enquiries
- co-operation with key partner agencies;
- Safeguarding Adults Boards
- Safeguarding Adult Reviews
- Information Sharing
- Supervision and training for staff

Accountability for this will sit with the Torbay Safeguarding Adults Board (TSAB). This is a well-established group that will provide a sound basis for delivering the new legislative requirements. The Board will incorporate the requirements into its terms of reference and Business Plan for 2017/18, ensuring that all relevant operational and policy changes are in place for April implementation.

Regular performance analysis from all partner agencies will be reported to the TSAB to give a clear picture of performance across the agencies. The Council will ensure high level representation on the Board by the Director of Adult Social Care Services and Executive Lead for Adult Social Care.

In order to maximise capacity Torbay SAB will work closely with the Devon SAB with an increased number of joint sub-committees and shared business support. In addition to this, to provide internal assurance that the Trust is fulfilling its Safeguarding Adult requirements, the Board will have a sub-committee which will oversee performance. This will have a particular focus on training and performance activity.

The Council has signed up to the national initiative of **Making Safeguarding Personal**. This is an exciting initiative designed to measure Safeguarding Adult performance by outcomes for the individual, rather than the current reliance on quantitative measurement of timescales for strategy meetings and case conferences. Work will continue to be done through TSAB during 2017/18 to implement these new measures in Torbay and to report qualitative measures in addition to ASCOF to SCPB.

The Trust also has delegated responsibility as a provider of adult social care services to ensure that it participate as a full partner in the TSAB and meet all regulatory requirements in safeguarding adults and children.

4. Delivery and Performance Management: Adult Social Care Services

The present arrangements for adult social care delivery through an integrated health arrangement delivered by the ICO have been benchmarked against similar authorities in its family group¹. The results show -

In a comparison with similar local authorities, Torbay spends around £281.27 per head of total population, compared to £275.73 per head across the family comparator group of most similar local authorities.²

This demonstrates a good use of money through this contract when considering that Torbay performs very well in the following area -:

Excellent

- delayed discharges of care due to social care

And well in these areas –

Good

- proportion of people who use services who have control over their daily life.
- overall satisfaction of people who use services with their care and support.
- Information available to carers and service users

Opportunities for improvement are as follows

- ability of people to pay for their care themselves either with a direct payment or personal budget
- proportion of people with a learning disability living in their own homes and in paid employment
- The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services
- Reducing the adult social care unit cost so that performance improves in comparison to other CIPFA family group local authorities.

Audit South West's January 2017 audit report looking at the Trust's care assessment process has confirmed that "the Trust's arrangements for the assessment of the care needs of referred individuals, and determination of eligibility to receive publicly funded care and support is in line with the Care Act 2014 and are appropriate. Staff are able to access a range of training and operational support mechanisms to help them discharge these key responsibilities."

Appendix 2 provides further detail in respect of the areas above

¹ Torbay's family group of comparator authorities are groups of authorities that central government consider have similar patterns of deprivation and age profiles etc.

² N.B. It should be noted that the ASA applies to the delegation of authority and activity in respect of Adult Social Care and does not include Children's services. The ICO's use of funds to deliver these services should therefore focus on adult social care when comparisons are made with other authorities.

Unit cost improvement

The Trust will work with Torbay Council and SDTCCG to develop and implement a number of ASC cost improvement projects as part of wider system savings plans to:

- Ensure expenditure and performance controls are in place to manage the Council's expenditure on ASC and exposure to risk
- Rationalise commissioning function and create cost effective commissioning support for Torbay Council and the ICO
- Reshape the Market to increase quality and value for money incentivising independence and reducing reliance on residential and nursing care
- Reduce adult social care unit costs through better use of supported living as an alternative to residential care and increase use of direct payments and payments cards
- Manage increasing demand pressures and reduce low level packages of care by ensuring conversations and criteria signpost new referrals to other offers of support before statutory services are considered and a review of low level packages of care
- Reduction in cost of social work activity including, redesign of skill mix and workforce to implement care model, a new support planning process and protocol for self-funders.

This builds on sound and fair performance as demonstrated in Appendix 2.1 an extraction in respect of the Adult Social Care element of the CIPFA (Chartered Institute of Public Finance and Accountancy) 2016/17 charts for Torbay. The measures are against Torbay's government identified 'family group' of similar authorities. The tables demonstrate a reasonable performance with opportunity for improvement.

5. Service Developments

Key developments in the way ASC services are provided, and any changes in what services will be provided, are outlined in the following paragraphs. Where appropriate the planning and implementation of these changes will involve internal and external consultation with key stakeholders as set out in the Decision Tracker which is managed by the Trust and taken through the Adult Social Care Programme Board. Where appropriate the Decision Tracker will also clarify accountability for decision making in these developments.

The new care model will target resources to those in greatest need and provide a universal service to allow people to be as independent as possible and be connected with their local community. The new care model will require significant change and we will need to ensure that we support staff and managers through complex change.

To support the resilience and sustainability of services, we will work closely with the independent and voluntary sector in relation to co-production of solutions that provide solutions for 'what matters to me'.

The Ageing Well Programme, led by the Community Development Trust, and information and advice services are enablers to improve access to preventative services and providing alternatives to traditional social care commissioned services and promoting self-care with increased enablement, independence and wellbeing.

5.1 Social Care Workforce Plan

Delivery of Care Act compliance is a key deliverable for our social care staff and in 2017/18 we will develop and implement a workforce plan for social care services which focuses on:

- Working in partnership with our community, addressing the issues faced by our most vulnerable members;
- Revisiting our approach to ensure we are inclusive with users, carers and community organisations – using strengths based approaches as our principal theoretical approach and operating model;
- Promoting the reputation of social work in Torbay through engagement with users and the co-design of our approach;
- Supporting staff to reach their potential using a capability framework; responding to the Social Work health check and by providing support to improve resilience;
- Delivering a high quality, safe and well respected service through use of quality, safety and governance processes.

In 2016/17 TSDFT undertook the Social Work Health Check

The health check indicated that there are arrangements in place for structures such as flexible working, staff welfare services and exit interviews. Despite increasing allocation lists, Social Workers did not report unmanageable caseloads or sickness due to stress. However, stress is a constant issue for Social Work. Although Social Workers do find time to attend training, and they find it useful, they feel it needs improvement in terms of specialist areas and opportunities for professional development.

These key areas were identified as performance and improvement priorities:

- Reducing the amount of process and computer inputting
- Improving training & CPD
- Clarifying arrangements for supervision
- Focusing on wellbeing and resilience

These areas will be addressed via an action plan in 2017/18.

5.2 Strength Based Approach

The Care Act 2014 requires local authorities to consider the person's own strengths and capabilities, and what support might be available from their wider support network or within the community to help in considering what else other or alongside the provision of care and support might assist the person in meeting the outcomes they want to achieve. In practice, this means operationalising strengths based approaches into the care model.

A strengths based approach is being embedded and scaled up within the new Health and Wellbeing Teams. It will become the golden thread which runs through all our interactions with people, both in terms of how we approach care and support in our teams and how our teams in turn approach care and support with the people they serve. To support the deployment of a strengths based approach we have developed the following principles for the implementation:

- We will empower staff to use their skills and experience;

- We will let go of care management approaches;
- We will focus on community involvement;
- We will concentrate on the assets and strengths of the people who use our services, our staff and our partners.

5.3 New Approach to Person Centred support Planning

During the course of 2017/18 the Trust will continue to explore new approaches to undertaking support planning. This will include furthering existing schemes for people with learning disabilities and undertaking wider proof of concept work in partnership with independent, voluntary and third sector organisations.

5.4 Wellbeing coordinators

There will be continued development of Wellbeing Coordinators within Health and Wellbeing teams. They will be a bridge between the statutory, independent and voluntary sector providing alternatives to traditional social care commissioned services. There will be a focus on reducing social isolation and providing support for activities that social care cannot do as they are required to focus on more complex work.

We will develop new approaches to support planning, building on the learning so far, which maximise the use our contracts with partners in the independent and the voluntary sector and best value.

5.5 Standardisation of process

We will continue to build on the standardisation work that streamlines our systems and processes making sure the most appropriate staff focus on the right work. We will build on the strength of delivering standardisation across the Bay whilst keeping a local focus for Paignton and Brixham and Torquay. We will use benchmarking to consider further opportunities for standardisation and the delivery of productivity and cost improvement.

5.6 Self directed support – including direct payments

Self-directed support using initiatives such as Individual Service Funds alongside Direct Payments will be encouraged. An infrastructure will be developed to support this, enabling people to identify their options, make informed decisions and have mechanisms that make the right thing to do the easy thing to do.

An example of this is the implementation of Direct Payment cards that took place in 2016/17

Development of the personal assistant market will be a key delivery element in 2017/18

5.7 Care Model Implementation

Health and wellbeing teams referred to in the Operational Plan will be providing a range of functions details of which are below:

- Encourage self-care, healthy lifestyles and maintain independence
- Help to grow community assets/develop resilience;
- Assessment, support planning and professional social work support;
- Provide rehabilitation;
- Provide nursing care;
- Integrated medical management of people with complex co-morbidities;

- Reactive care coordination of people with deteriorating complex health issues and frail elderly;
- Continue to embed and mainstream Learning Disabilities and working with the voluntary sector to support the delivery of this
- Proactive care co-ordination of people with complex needs and frail elderly;
- Proactive integrated long term conditions support;
- High quality discharge support from hospital to home, integrated planning and seamless handover of care;
- Provide falls prevention services;
- Provide palliative care as part of end of life care pathway.

In addition to its organizationally based governance structures the impact of these changes on community based care is such that the schedule of development and roll-out will be provided to and monitored through the Adult Social Care Programme board in respect of the community activity

5.8 Service for people with learning disabilities including Autism

Following a public consultation 2015/16 where a decision was made by the Trust board to close Baytree House, all associated work outlined in the 2016/17 Annual Strategic agreement has been achieved.

Work relating to people with learning disabilities and autism continues to progress. During 2017/18 work will continue to ensure people with a learning disability and or autism receive the right support, when they need it. To achieve this:

- A Learning Disability Strategy will be developed with clear action plan and accountability between partner organisations
- Development of a targeted action plan detailing improvements to be made following the Autism Self-Assessment Framework 2016.

Key to successfully addressing the needs of people with learning disabilities will be:

- The development of data collection relating to learning disability and autism to aid understanding of demand and pressures within the health and social care system.
- A skilled and effective workforce trained with specialist skills in social care assessment and engagement with workforce development associated with Devon Transforming Care Programme.
- Supporting the people to remain independent for as long as possible through effective accommodation and accommodation based support. This will be achieved through the creation of a Supported Living service specification and framework for providers in Torbay and link to work undertaken by Devon County Council.
- Providing effective support to enable people with learning disabilities and / or autism to gain and sustain employment.

5.9 Residential and day Services for Older People

Market management strategy to support and shape the local market for adult social care will be produced in the first quarter of 2017 led by council commissioners.

5.10 Reviews

Reviews will continue within zones and specialist services as part of business as usual. In

addition to this there is a review team who concentrate on high cost packages review. This team in 2017/18 will continue to focus on reviews of independent living providers with support from Commissioners to consider the care and accommodation costs and driving best value.

There will also be a review and further refinement of standardised processes and systems for high cost packages. This work will be ongoing throughout the year with outcomes reported through existing reporting arrangements.

5.11 Programme Management Office (PMO) arrangements to ensure delivery

This work will be coordinated through the Transformation Team, and the governance arrangements that are in place within the organisation, with progress being reported through the ASCPB. The Trust Wide Improvement Programme is detailed in the main Operational Plan to which this forms an appendix. A key programme of work impacting on Adult Social Care is the Placed People and Continuing Health Care work. This will be part of the development of the new model of care and a sustainable system which is detailed in the overarching Operational Plan and detailed Programmes/Projects

5.12 Key Milestones

These are to be agreed in line with the performance indicators and Trust Wide Improvement initiatives in advance of the contract year.

6. Mental Health

The Council has statutory responsibilities for providing services to eligible people with poor mental health under the Mental Health Act 1983 and NHS and Community Act 1990, which are delegated to the Trust. These include:

- Approval and provision of 'sufficient' numbers of Approved Mental Health Practitioners (AMHP);
- guardianship under section 7;
- financial and Budgetary responsibilities for the whole Mental Health budget, including activity below assigned to DPT.

Devon Partnership Trust (DPT) will be commissioned by the Council to operationally deliver these under 65 social care mental health services in Torbay. This is in compliance with Torbay Council's statutory duties under the Care Act, Mental Health Act and other relevant legislation, including:

- Aftercare under section 117;
- Care management services, including operational brokerage of social care packages.

Strategic Commissioning Support for this arrangement will be provided by Torbay Council's Joint Commissioning Team including, co-location of the Trust mental health commissioner and day to day work allocation and support.

Professional Practice oversight of AMHP needs to be defined and agreed. This arrangement will be governed by this annual strategic agreement and a contract between DPT and the Trust.

The priorities for the commissioned service in 2017 to 2018 are to be outlined in the Joint

Improvement Plan (JIMP) between the Council, and DPT. Close working with other commissioners such as the CCG will see this developed and monitored through Social Care Programme Board Quarterly performance and finance reports will be submitted to the ASCPB. A governance structure is in place with the Council, the Trust and Devon Partnership Trust. It is envisaged greater alignment of governance and strategic approach will be achieved with Devon County Council during 2017/18. It is expected that during 2017/18 employment of the Approved Mental Health Practitioners will transfer from the Council to Devon Partnership Trust.

7. Quality Assurance

7.1 National: CQC (Care Quality Commission)

The Commission will make sure health and social care services provide people with safe, effective, and compassionate high-quality care and encourage care services to improve. They monitor, inspect, and regulate services to make sure they meet fundamental standards of quality and safety and publish what they find, including performance ratings to help people choose care.

7.2 Local: Torbay and South Devon NHSFT

The Trust will provide quality assurance of both its own integrated business activity and the services it commissions on behalf of the community. A quality and safety report is being developed, which will report all social care quality, safety and performance metrics quarterly. Interim performance monitoring is via the ASCPB; which receives performance reports and updates on ad hoc issues.

A Quality Assurance Framework has been developed and is now in use with independent and voluntary sector providers to provide assurance in regard to the quality of care provided to people in their own homes and in care homes.

7.3 Multi-agency Safeguarding Hub (MASH)

Since October 2015 the Single Point of Contact for safeguarding adults has been co-located with Torbay Council Children's Services

There will be a continued focus on ensuring that all staff have the appropriate level of training for their role, as set out in the Torbay Safeguarding Adults Multi-Agency Training Policy.

8. Finance and Risks

8.1 Budget Allocations

The allocations to be included in the Risk Share Agreement (RSA) 2017/18 as per the agreed five year RSA September 2015 is £35.6m. The council positively adjusted this by £0.860m to accommodate the results of the care homes judicial review part one resulting in a figure of £36.460m. The council has also made further commitment to the integrated system for the 2017/18 year adjusting the budget by an additional £0.1m resulting in a final budget of £36.560m. In addition the council will pass over the Independent Living Fund (ILF) grant in full.

The Council will honour its 9% share of any ICO deficit. This is full year so will be ¾ of those values if ASA/RSA is to end of December 2017 given the January 2017 serving of notice on the RSA by the ICO

8.2 Financial Risk Share

The Risk Share Agreement (RSA) developed as part of the transaction creating the ICO took effect from its inception on 1st October 2015. The share of financial risk going forward is a function of the wider performance of the Trust, rather than specifically in relation to Adult Social Care.

The financial baseline from the Council and the CCG commissioners funding the ICO will appear in as the RSA appendix to the Operational plan.

8.2.1 Notice served on Risk Share Agreement

It is to be noted that the ICO have served notice on the RSA as of January 2017, the notice period being twelve (12) months.

Whilst the intent is to be able to continue to work in partnership and renegotiate the RSA the current position is that this ASA is effective for nine months of the financial year to which it relates.

If the current RSA finishes end of December 2017 in line with recent ICO notice of withdrawal, then the current Better Care Fund arrangements between the Council and South Devon and Torbay CCG in support of the RSA will also cease and will need to be revised in line with national BCF guidance.

8.2.2 Efficiency Risks:

- Delivery of the Trust wide Improvement Programme;
- Agency and temporary staffing costs;
- Increasing costs of medical technologies;
- Rate of expenditure in both Adult Social Care and Place People;
- Delayed delivery of financial benefits associated with the implementation of the revised care model

8.2.3 Risks pertinent to Adult Social Care expenditure include:

- The scaled of savings required;
- The Judicial Review challenging Care Home Fee set by the Council;
- Insufficient capacity in the domiciliary care market;
- Sufficiency in the care home market;
- Community Support for Change;
- Impact of case law relating to the Deprivation of Liberty Safeguards;
- Pressures within the out of hours Emergency Duty Service;
- Impact of the Care Act;
- The increasing complexity of needs
- The risk within the Risk Share Agreement in respect of any cumulative overspend being shared between three organisations.

8.3 Revenue Budget 2017/18 and 2018/19

The budget allocated by the Council for Adult Social care Service is set out in 8.1 above . The budget is predicated on the ICO achieving the commitments that it has made within the Trust Wide Improvement programmes.

The Council will review the budget annually and in the light of the negotiations as to future Risk Share and pooled budget arrangements, whilst continuing to consider a multi-year agreement the appropriate direction of travel.

8.4 Care Home Fees Judicial Review Appeal

The commitment of £0.860m adjustment to the RSA set out in 8.1 is an interim assessment of the increase in care home fees associated the judicial review established in 2015/16. The Council have agreed to fund this in addition to the original opening baseline, along with any additional settlement agreed or instructed in the final decision on the judicial review appeal. The appeal is now scheduled to be heard in June 2017 so this outstanding risk is carried forwards.

In respect of 2017/18 an make an interim decision on fees will be made pending the outcome of the judicial review.

8.5 Better Care Fund

The guidance and directions in terms of the BCF for 2017/18 will not be available until first quarter 2017. Once received the BCF commitments will form an addendum to the ASA.

9. Client Charges

9.1 Power to charge

With the introduction of the Care Act, the Council now has a 'power to charge for services' whereas previously, there was a 'duty to charge' for long term residential/nursing care and a 'power to charge' for non-residential care.

The Council has made the decision to utilise the 'power to charge' for both residential and non-residential services. The Trust will discharge this power on behalf of the Council and in doing so will apply sections 14 and 17 of the Care Act and the Care and Support (charging and assessment of resources) regulations 2014.

9.2 Residential and Non Residential Charges

Charges per unit of care for residential services will be amended each April as directed by the Department of Health new rates.

Charges per unit of care for non-residential care services will be set annually through the Council's charging policy.

Client contributions are based on the level of care a person requires and an assessment of their financial circumstances, including capital and income. The Trust will ensure that individual financial assessments are updated at least annually (but more frequently where the financial circumstances of an individual service user are known to have changed during the course of the year).

Consequently the charges made to an individual may change in the course of a year if

there are changes in their financial circumstance or the level of care they require.

The Trust will ensure that all clients in receipt of a chargeable service receive a full welfare benefit check from the Finance and Benefits team and an individual financial assessment in person for new assessments where possible.

There is no charge for Intermediate Care or Continuing Health Care services.

9.3 Carers

Services provided specifically to carers will, in principle, not be subject to a charge but this will remain under review dependent upon resource allocation. These are services provided directly to the carer (rather than the person that they care for) which include open access services such as Carers Emergency Card and Carers Education Courses, and simple services provided as a result of an assessment including emotional support or one-off direct payments for a carer's break.

9.4 Universal Deferred Payments

The Care Act 2014 established a requirement for a universal deferred payments scheme which means that people should not be forced to sell their homes in their lifetime to pay for the cost of their care.

A deferred payment is, in effect, a loan against the value of the property which has to be repaid either from disposal of the property at some point in the future or from other sources. The scheme has now been running since April 2015 as all councils in England are required to provide a deferred payment scheme for local residents who move to live in residential or nursing care, own a property and have other assets with a value below a pre-determined amount (currently £23,250). They must also have assessed care needs for residential or nursing care.

The Council's deferred payments policy is now fully implemented as part of the policy the Trust has the ability to recover any reasonable costs it may incur in setting up a Deferred Payment Arrangement in addition to the cost of any services provided. These management costs may be included in the deferred payment total or be paid as and when they are incurred.

The interest rate payable on deferred payments is advised by the Department of Health and changed every six months. Interest will be added to the balance outstanding on the deferred arrangement on a compound daily basis, in accordance with the regulations.

10. Governance

10.1 Adult Social Care Programme Board

The Adult Social Care Programme Board remains the contract management Board for this Agreement. The Board will drive adult social care and improvement plans. Its Terms of Reference cover the following areas:

- To assist the development of the strategic direction of adult social care services supporting the new context faced by the Council and Trust in terms of public sector reform, reducing public resources and potential devolution;
- To receive regular reports and review progress against transformation and cost improvement plans differentiating between those areas incorporated within the budget settlement and any cost pressures over and above this;

- To receive reports and review performance against indicators and outcomes included in the Annual Strategic Agreement providing and/or participating in regular benchmarking activities;
- To monitor action plans against any in-year areas of concern, raising awareness to a wider audience, as appropriate;
- To discuss and determine the impact of national directives translating requirements into commissioning decisions for further discussion and approval within the appropriate forums. This will include the initial list of service improvement areas planned for 2017-19 and onwards;
- To discuss and develop future Annual Strategic Agreements; co-ordinate the production of the Local Account.
- To escalate issues of concern or delivery to the Contract Review meeting and the Risk Share Oversight Group as appropriate
- To receive and review the progress of the Trust Wide Improvement Plans impacting on Adult Social Care

The Adult Social Care Programme Board sits within the governance framework for the overall contract, which is set out in Appendix 3

10.2 Consultation, engagement and involvement process

As the Accountable Authority the Council will lead consultation processes where the need for change is being driven by the needs and requirements of the Council beyond those of delegated activities to the Trust. The Trust is committed to supporting the consultation and engagement processes the Council undertakes in relation to service changes recognising the Council's statutory duty and good practice.

As a provider the Trust will engage all stakeholders in service redesign and quality assurance including, playing an active role with Torbay Council Health Overview and Scrutiny Committee. Additionally the Trust will be engaged with the CCG Locality Teams where the primary focus will be on consultation in regard to NHS services.

Where service changes will result in variation in the level or type of service received by individual service users, the Trust will comply with statutory guidance on the review/reassessment of care needs and ensure that those service users affected are given appropriate notice of any changes.

The Council, the Trust, and the CCG will continue to support the role of Healthwatch and the community voluntary sector in involving people who use services in key decisions as well as service improvement and design. The Council also expects the Trust to engage actively with service users and the voluntary sector in Torbay in developing new service solutions. This will apply irrespective of whether the service changes are driven by the necessities of the current financial environment or the need to ensure the continual evolution and development of services.

10.3 Programme Management

Oversight of delivery and programme management for the programmes of work set out in this Agreement will be provided through the Trust's Programme Management Office. Delivery will be tracked by the Trust's Programme Management Office (PMO), monitored through standing internal meetings (such as the Community Divisional Board) and reported to the ASCPB.

10.4 Key Decisions

Whilst this agreement places accountabilities on the Trust for the delivery and development of Adult Social Care Services, the Trust may not act unilaterally to make or enact decisions if they meet the criteria of a 'key decision' as described in the standing orders of the Council or are included in a list of 'Reserved Items' shared between the parties as part of the agreement and which would be listed in an appendix.

This requirement reiterates section 22.3 of the Partnership Agreement under which services were originally transferred from the Council to Torbay Care Trust. Key decisions must be made by the Council in accordance with its constitution.

In Schedule 8 of the Partnership Agreement a key decision is defined as a decision in relation to the exercise of council functions, which is likely to:

- Result in incurring additional expenditure or making of savings which are more than £250,000;
- Result in an existing service being reduced by more than 10% or may cease altogether;
- Affect a service which is currently provided in-house which may be outsourced or vice versa and other criteria stated within schedule 8 of the Partnership Agreement.

In addition when determining what constitutes a key decision consideration should be given to the possible level of public interest in the decision. The higher the level of interest the more appropriate it is that the decision should be considered to be a 'key decision'.

10.5 Governance of other decisions

Governance of other decisions will vary according to the scope and sensitivity of the decision being made. To ensure clarity about whether decisions are to be taken by the Trust, Council or CCG and at what level the decision should be taken a 'Decision Tracker' has been developed.

The Decision Tracker will be reviewed, managed and updated by the ASCPB throughout the year.

10.6 Governance of Placed People

With the negotiations that will take place during 2017/18 in respect of a revised relationship between the parties with notice having been served on the Risk Share (expiring 31 December 2017), there is a need to increase the focus on those areas where direct social care impact can be or needs to be identified. This will support discussions and options. In respect of Placed People, Adult Social care will be clearly identified and reported alongside health, Continuing Health Care, with clear allocation between the two as to clients, activity and spend. The pooled arrangements continue to report within the existing structure whilst oversight will be undertaken through Social Care Programme Board for information purposes with the papers that will be enhanced to reflect this delineation which are reported to the Joint Executive

This is displayed diagrammatically in Appendix 4

Acknowledging the change in the Risk Share Agreement and being cognisant of its implications to adult social care elements of the service delivery by the ICO, the framework for Council Decision taking is included at Appendix 9 for reference

10.7 Risk Share Oversight Group

The Risk Share Agreement (RSA) describes the framework for the financial management of the multi-year investment by health and social care commissioners for the services provided by the Trust. The RSA sits alongside the NHS Standard Contract and this Agreement. Whilst does not override the quality or administrative elements it does supersede all financial components.

The implementation of the RSA will be monitored by the Risk-Share Oversight Group (RSOG), which includes senior officer representation from the Council and Directors from the Trust and CCG, to provide strategic oversight of the RSA.

A diagram of the governance structure is included Appendix 3

10.8 Roles and Responsibilities

10.8.1 Torbay Council Executive Lead Adults and Children

The role of Executive Lead is held by an elected Member of Torbay Council, as part of their duties they will sit as the Council's representative on the Trust Board to provide oversight, challenge, and liaison.

10.8.2 Director of Adult Social Services

The role of Director of Adult Social Services (DASS) is a statutory function, and is fulfilled by a senior officer of the Council who is accountable for all seven responsibilities of the role set out in statutory guidance dated May 2006. However responsibility for Professional Practice and Safeguarding are delegated to the Deputy DASS employed within the professional practice directorate of the Trust.

10.8.3 Assistant Director of Adult Social Services

The role will provide professional leadership for social care services and lead on workforce planning, implementing standards of care, safeguarding and support the running of the Adult Social Care Programme Board. The role also oversees the Deprivation of Liberty Safeguards and Guardianship arrangements in Torbay.

10.8.4 Organisational Roles and Responsibilities

The partnership working inherent within the Torbay model is supported by further clarification of the organizational roles pertaining to the local authority as the commissioning partner of the contract and the Trust as the providing partner including commissioning responsibilities within its delegated activities. A range of activities for reference is included in Appendix 5 – Strategic and Micro-commissioning functions

10.9 Emergency Cascade

Please see Appendix 6 for details of Torbay Council's Emergency Planning Roles in Council's Emergency cascade. The Trust will be expected, through best endeavors, to identify social care senior officers to be part of emergency cascade, to coordinate delivery of Adult Social Care in an emergency situation.

10.10 Annual Audit Programme

Audit South West (ASW) as the Internal Audit provider to Torbay and South Devon NHS Foundation Trust will undertake the following actions and requirements:-

Consult with the Director of Adults Services (DAS) of Torbay council on proposed internal audit coverage

Provide to the DAS copies of assignment reports that relate to control arrangements for Adult Services

Provide an annual report to the DAS on the adequacy and effectiveness of the overall system of internal control for the Trust, and in particular, those areas directly affecting Adult Services.

Detail is included in appendix 7

Appendix 1 - Performance Measures ASCOF / BCF / L.I.

Distilled from the Adult Social Care Outcomes Framework (ASCOF), Better Care Fund (BCF) & Local Indicators (Version 3.7)

Due to the timing of the operational plan as required by NHS England this year, the out-turns on which the targets would normally be agreed for Adult Social Care are not available. These will be negotiated with partners with an update to be provided to February Council

The latest figures discussed at Social Care Programme Board form this appendix interim



2015-2016 ASC
Benchmarking v1_3b


Appendix 2 - Summary of the Adult Social Care Outcomes Framework for Torbay (Jan '17)

SUMMARY OF THE ADULT SOCIAL CARE OUTCOMES FRAMEWORK FOR TORBAY (JAN '17)									
Indicator	Time period	Count	Torbay value	Comparison group average	England average	Unit of measure	Trend	Trend guide	
1A: Social care-related quality of life score	2015/16	359	19.7	19.3	19.1	%		Higher is better	
1B: The proportion of people who use services who have control over their daily life	2015/16	401	81.5	79.1	76.6	%		Higher is better	
1C(1): Proportion of people using social care who receive self-directed support	2013/14	3,155	82.8	57.2	61.9	%		Higher is better	
1C(2): Proportion of people using social care who receive direct payments	2013/14	790	15.7	15.1	19.1	%		Higher is better	
1C(1A): The proportion of people who use services who receive self-directed support	2015/16	1,294	93.6	96.0	86.9	%		Higher is better	
1C(1B): The proportion of carers who receive self-directed support	2015/16	306	83.4	79.3	77.7	%		Higher is better	
1C(2A): The proportion of people who use services who receive direct payments	2015/16	369	26.7	29.2	28.1	%		Higher is better	
1C(2B): The proportion of carers who receive direct payments	2015/16	306	83.4	57.9	67.4	%		Higher is better	
1D: Carer-reported quality of life	2014/15	345	8.3	8.0	7.9	%		Higher is better	
1E: The proportion of adults with a learning disability in paid employment	2015/16	15	3.9	5.7	5.8	%		Higher is better	
1F: The proportion of adults in contact with secondary mental health services in paid employment	2015/16	-	3.1	-	6.7	%		Higher is better	
1G: The proportion of adults with a learning disability who live in their own home or with their family	2015/16	253	70.1	76.4	75.4	%		Higher is better	
1H: The proportion of adults in contact with secondary mental health services living independently, with or without support	2015/16	-	63.2	-	58.6	%		Higher is better	
1I(1): The proportion of people who use services who reported that they had as much social contact as they would like	2015/16	395	49.4	47.0	45.4	%		Higher is better	
1I(2): The proportion of carers who reported that they had as much social contact as they would like	2014/15	370	41.5	38.9	38.5	%		Higher is better	
2A(1): Permanent admissions of younger adults (aged 18 to 64) to residential and nursing care homes, per 100,000 population	2013/14	25	36.4	16.3	14.4	Rate per 100,000		Lower is better	
2A(1): Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	2015/16	12	16.3	16.2	13.3	Rate per 100,000		Lower is better	
2A(2): Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	2013/14	205	614.1	729.3	650.6	Rate per 100,000		Lower is better	
2A(2): Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	2015/16	176	513.0	707.5	628.2	Rate per 100,000		Lower is better	
2B(1): The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	2015/16	173	75.9	84.5	82.7	%		Higher is better	
2B(2): The proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital	2015/16	228	4.4	3.4	2.9	%		Higher is better	
2C(1): Delayed transfers of care from hospital, per 100,000	2015/16	6	5.9	12.4	12.1	Rate per 100,000		Lower is better	
2C(2): Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population	2015/16	3	2.3	5.3	4.7	Rate per 100,000		Lower is better	
2D: The outcome of short-term services: sequel to service	2015/16	781	81.8	81.7	75.8	%		Higher is better	
3A: Overall satisfaction of people who use services with their care and support	2015/16	389	67.9	66.2	64.4	%		Higher is better	
3B: Overall satisfaction of carers with social services	2014/15	290	46.4	43.8	41.2	%		Higher is better	
3C: The proportion of carers who report that they have been included or consulted in discussion about the person they care for	2014/15	265	75.7	73.1	72.3	%		Higher is better	
3D: Proportion of people who use services and carers who find it easy to find information about services	2012/13	-	75.2	74.5	71.4	%		Higher is better	
3D(1): Proportion of people who use services and carers who find it easy to find information about services	2015/16	273	81.3	76.4	73.5	%		Higher is better	
3D(2): The proportion of carers who find it easy to find information about support	2014/15	265	74.9	68.7	65.5	%		Higher is better	
4A: The proportion of people who use services who feel safe	2015/16	399	72.3	70.6	69.2	%		Higher is better	
4B: The proportion of people who use services who say that those services have made them feel safe and secure	2015/16	390	85.2	88.0	85.4	%		Higher is better	

Notes:

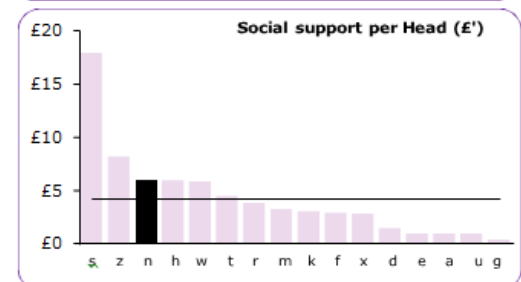
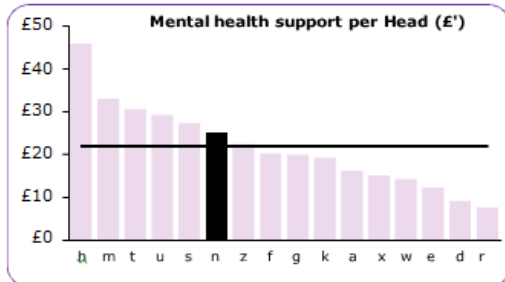
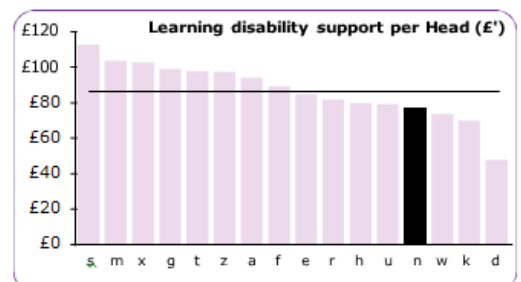
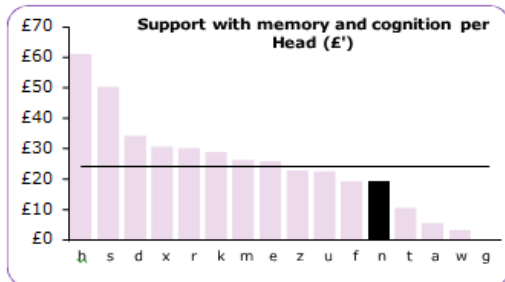
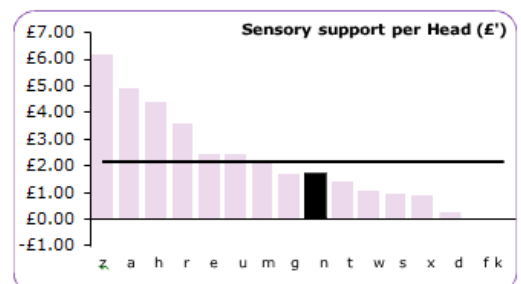
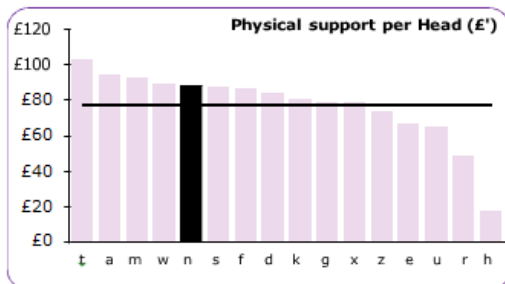
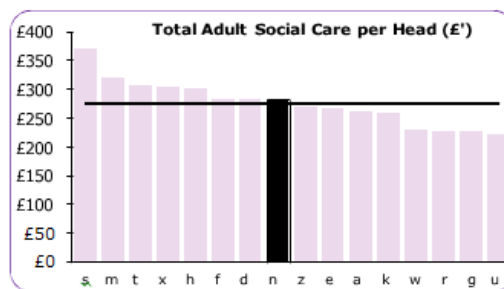
- Torbay value is statistically significantly higher or better than the England average
- Torbay value is not statistically significantly different to the England average
- Torbay value is statistically lower or worse than the England average
- No statistical significance calculated

Source: NHS Digital, Measures from the Adult Social Care Outcomes Framework (ASCOF), England
<http://www.content.digital.nhs.uk/catalogue/PUB21900>
 Comparator group based on CIPFA nearest neighbours



Appendix 2.1 - Adult Social Care Extract from Torbay CIPFA Local Authority Budget Comparative Profile - 'Family' Group Authorities

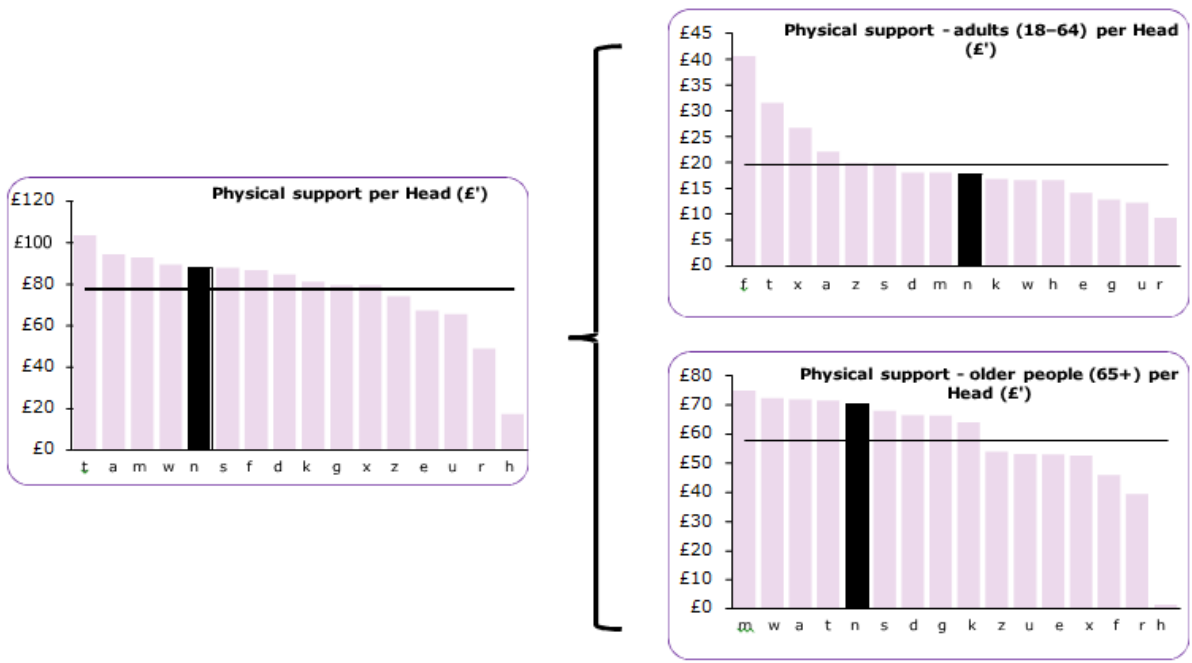
2016-17 Estimates	£'000	£ per head	Avg £ per head
Physical support	11,742	88.02	77.17
Sensory support	227	1.70	2.12
Support with memory and cognition	2,528	18.95	24.36
Learning disability support	10,215	76.57	86.27
Mental health support	3,331	24.97	21.67
Social support	792	5.94	4.24
Assistive equipment and technology	640	4.80	3.56
Social care activities	5,205	39.02	30.56
Information and early intervention	412	3.09	3.06
Commissioning and service delivery	2,429	18.21	22.71
Total	37,521	281.27	275.73





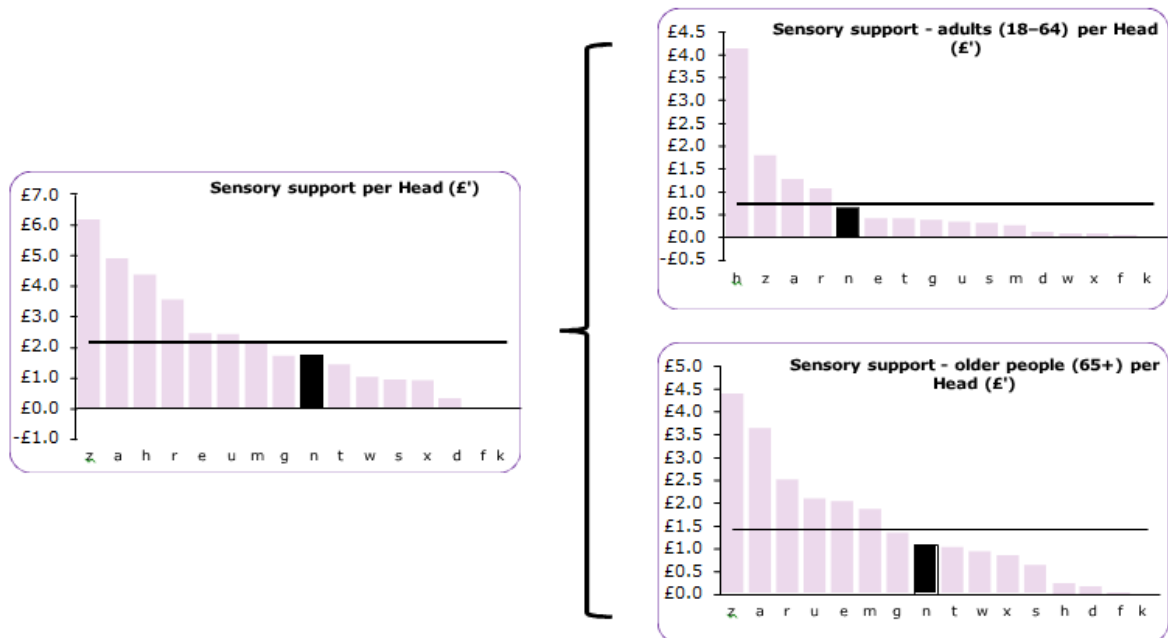
Adult Social Care - Physical Support

2016-17 Estimates	£'000	£ per head	Avg £ per head
Physical support - adults (18-64)	2,365	17.73	19.44
Physical support - adults (65+)	9,377	70.29	57.74
Total	11,742	88.02	77.17



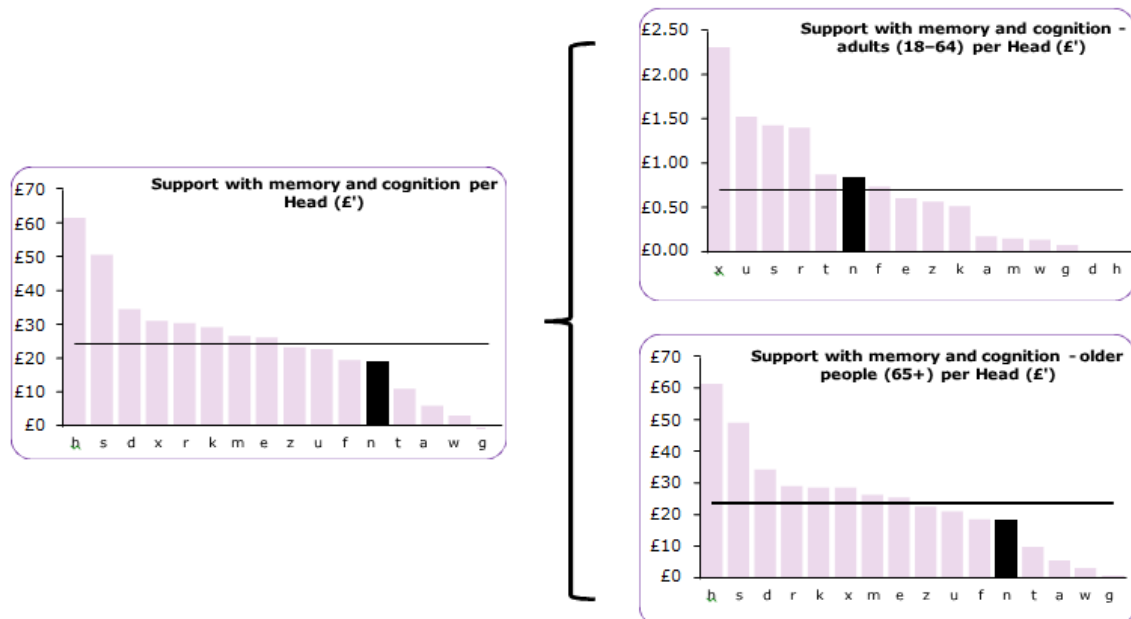
Adult Social Care – Sensory Support

2016-17 Estimates	£'000	£ per head	Avg £ per head
Sensory support - adults (18-64)	84	0.63	0.70
Sensory support - older people (65+)	143	1.07	1.42
Total	227	1.70	2.12



Adult Social Care – Support with memory and cognition

2016-17 Estimates	£'000	£ per head	Avg £ per head
Support with memory and cognition - adults (18-64)	112	0.84	0.71
Support with memory and cognition - older people (65+)	2,416	18.11	23.65
Total	2,528	18.95	24.36



Adult Social Care – Learning disability support

2016-17 Estimates	£'000	£ per head	Avg £ per head
Learning disability support - adults (18-64)	9,100	68.22	77.05
Learning disability support - older people (65+)	1,115	8.36	9.21
Total	10,215	76.57	86.27



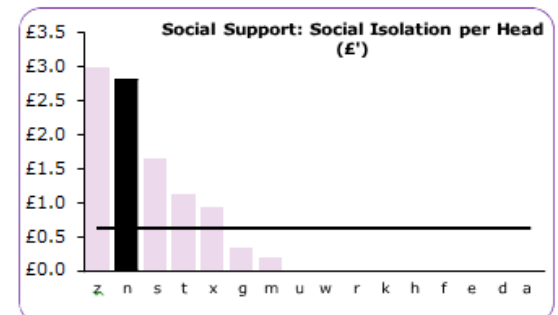
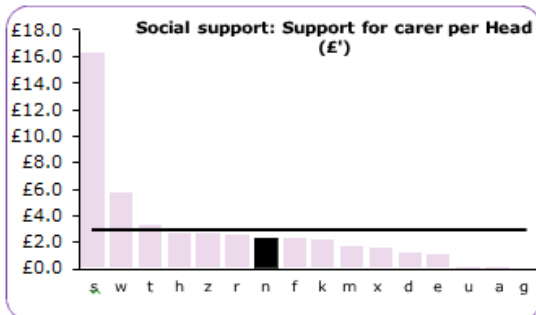
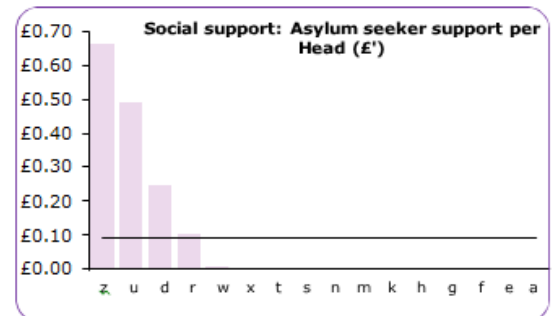
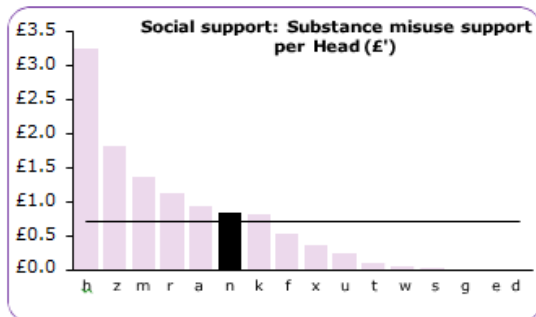
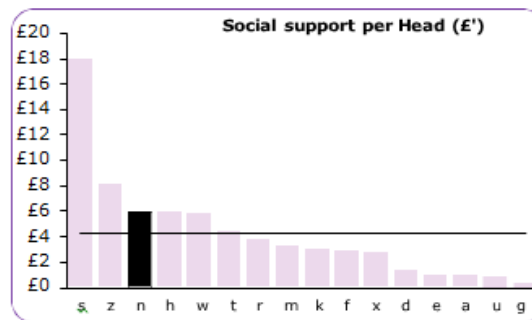
Adult Social Care – Mental health support

2016-17 Estimates	£'000	£ per head	Avg £ per head
Mental health support - adults (18-64)	1,835	13.76	12.00
Mental health support - older people (65+)	1,496	11.21	9.68
Total	3,331	24.97	21.67

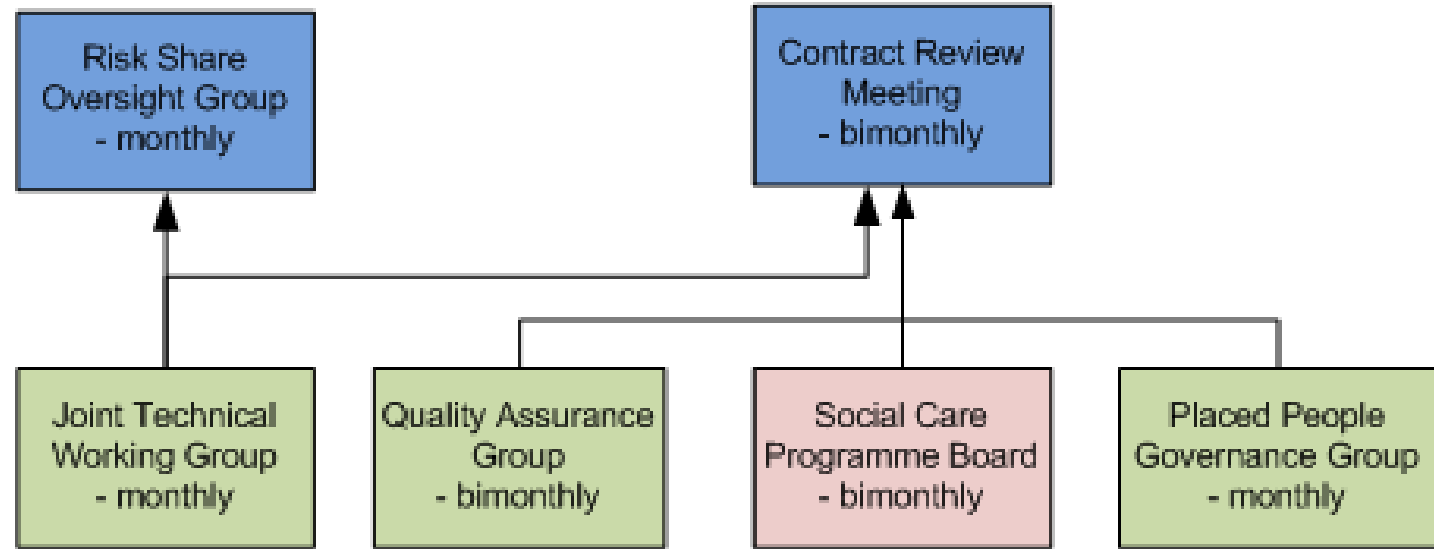


Adult Social Care – Social Support

2016-17 Estimates	£'000	£ per head	Avg £ per head
Social support: Substance misuse support	111	0.83	0.71
Social support: Asylum seeker support	-	-	0.09
Social support: Support for carer	309	2.32	2.82
Social support: Social Isolation	372	2.79	0.62
Total	792	5.94	4.24



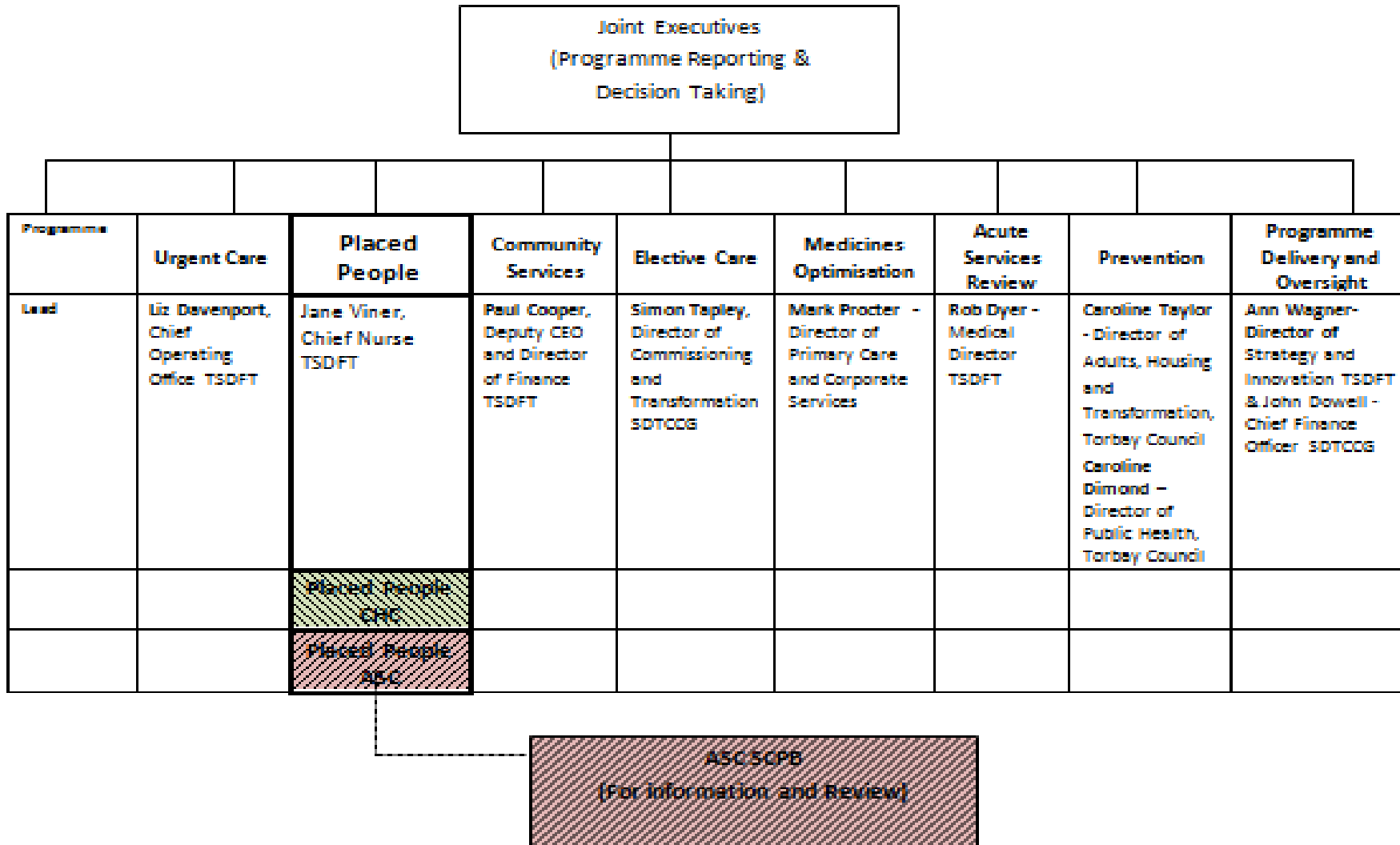
Appendix 3 – Governance Structures



Key:

Health assurance
Adult Social Care assurance
Health and Adult Social Care assurance

Appendix 4 - Programmes of the Joint Executive and Placed People Governance



Appendix 5 – Strategic and Micro-commissioning functions

Function/role lead	Torbay Council Strategic Commissioning function	Torbay and South Devon Trust adult social care function
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STRATEGIC COMMISSIONING FUNCTION		
Market shaping and developing new providers to fill gaps in provision and oversight of decommissioning plans	✓	
Market Position statement and Joint Strategic Needs Assessment	✓	
Market mapping	✓	
Gap analysis	✓	
Analysis of sufficiency of supply	✓	
Manage provider failures and market exits	✓	✓
Strategic Commissioning Strategy	✓	
Proactive strategy to develop the market as a whole	✓	
Market engagement with provider market as a whole	✓	
Run Multi Provider Forum for all providers with strategic themes	✓	
Joint commissioning arrangements with partner organisations and other areas	✓	
Lead on co-design of new service models with providers and stakeholders	✓	✓
Develop population outcome based commissioning approach for market	✓	
Develop and c-produce Payment by Results mechanisms that encourage sound outcomes	✓	
Co-ordinate user and carer engagement and consultation	✓	
Contract review and performance management of adult social care	✓	
Review budget for adult social care and sign-off cost improvement plans related to Adult Social Care	✓	

Function/role lead	Torbay Council Strategic Commissioning function	Torbay and South Devon Trust adult social care function
MICRO COMMISSIONING OF PROVIDERS, PROCUREMENT AND BROKERAGE		
Develop and implement operational commissioning plans		✓
Overarching sub contracts between Trust and other adult social care providers, eg Care homes, community care		✓
Prepare and agree individual service specifications		✓
Develop and monitor outcome based commissioning approach for each provider at service level	✓	✓
Develop personal outcome based commissioning for each service user		✓
Contract management & performance review of independent & voluntary sector including, grant funding		✓
Proactive quality assurance of individual providers including, develop/implement service improvement plans		✓
Achieving value for money from providers including, cost improvement planning		✓
Procurement of adult social care providers		✓
Manage provider failures and market exits including, for service users and relatives/carers involved		✓
Individual contracts for care packages		✓
Brokerage/purchasing processes and brokerage of individual care packages		✓
Direct payments and personal budgets		✓
Lead and manage safeguarding processes including, Whole Provider/Provider of concern/quality concerns		✓
Resolution of Safeguarding incidents and implementation of lessons learned		✓
Run and co-ordinate forums for specific provider areas with operational focus eg forums for care homes		✓
Collection, collation and regular reporting of data on need, demand, supply, cost, workforce and performance (Trust and sub contractors) with interpretation and presentation		✓
Benchmarking of cost/performance of services – own and sub-contracted		✓
Management of pooled budget to achieve value for money and cost improvement		✓

Appendix 6 – Emergency Cascade

Adult Services Primary Contacts		
Name/Title	Emergency Role	
Frances Mason, Head of Partnerships, People and Housing	Communication with contracted providers of Care and Support for vulnerable people. Availability and co-ordination of needs assessment. Safeguarding vulnerable adults and serious case review including authorisation of deprivation of liberty under Mental Capacity Act.	
Joanna Williams, Associate Director of Adult Social Services	The role will provide professional leadership for social care services and lead on workforce planning, implementing standards of care, safeguarding and support the running of the Adult Social Care Programme Board. The role also oversees the Deprivation of Liberty Safeguards and Guardianship arrangements in Torbay.	
Adults Services Secondary Contacts		
Robin Willoughby, Lead AMHP	Assessment and placement, access to services, medication and packages of care and place of safety for older people with poor mental health	
Sharon O'Reilly, Manager Older Person Mental Health Team	Assessment and placement, access to services, medication and packages of care and place of safety for people under 65 with poor mental health.	

Appendix 7 – Annual Audit Programme

Background

For Torbay Council, Internal Audit is a statutory service in the context of The Accounts and Audit (England) Regulations 2015.

From April 2013, organisations in the UK public sector are required to adhere to the Public Sector Internal Audit Standards (the Standards).

Internal Audit for Torbay & South Devon NHS Foundation Trust is delivered by Audit South West.

Internal Audit Plans

When preparing the internal audit plan for Torbay and South Devon NHS Foundation Trust it is expected that Audit South West will :

- Consider the risks identified in Torbay Council's strategic & operational risk registers that relate to Adult Services
- Discuss and liaise with Directors and Senior Officers of Torbay Council regarding the risks which threaten the achievement of the Council's corporate or service objectives that relate to Adult Services, including changes and / or the introduction of new systems, operations, programs, and corporate initiatives
- Take account of requirements to support a “collaborative audit” approach with the external auditors of Torbay Council
- Consider counter-fraud arrangements and assist in the protection of public funds and accountability.
- Support national requirements, such as the National Fraud Initiative (NFI) which is run every two years.

Draft plans, showing proposed audits covering Adult Services should be shared and agreed with Torbay Council's Director of Adult Services (DAS).

The DAS should also be made aware of planned audit reviews that will provide overall assurance that control mechanisms operated by the Trust, but that are key to the workings of Adult Services, are working effectively. (e.g. audits of key financial systems (Payroll, payments, income collection etc.) and corporate arrangements (e.g. procurement, Information Governance etc.)).

The Audit Plan will not be a "tablet of stone" and changes may be required or advised during the year.

Internal Audit work

Internal audit work should be completed in accordance with the PSIAS.

Proposed briefs for work covering Adult Social Care should be shared with the DAS prior to fieldwork commencing.

Reporting - Assignments

The DAS will be provided of copies of all final reports that specifically relate to Adult Services.

The DAS will also be provided with early sight of draft reports for which the audit opinion is "fundamental weaknesses" or similar.

The Director of ASC will also be provided with copied of final audit reports for wider subject areas (e.g. payroll) where the audit opinion is "fundamental weaknesses" or similar.

Reporting – Annual Report

Audit South West will provide the Council with an annual assurance report on the adequacy and effectiveness of the overall system of internal control for the Trust, and in particular, those areas directly affecting Adult Services. It is noted that this assurance can never be absolute. The most that the internal audit service can do is to provide reasonable assurance, based on risk-based reviews and sample testing, that there are no major weaknesses in the system of control.

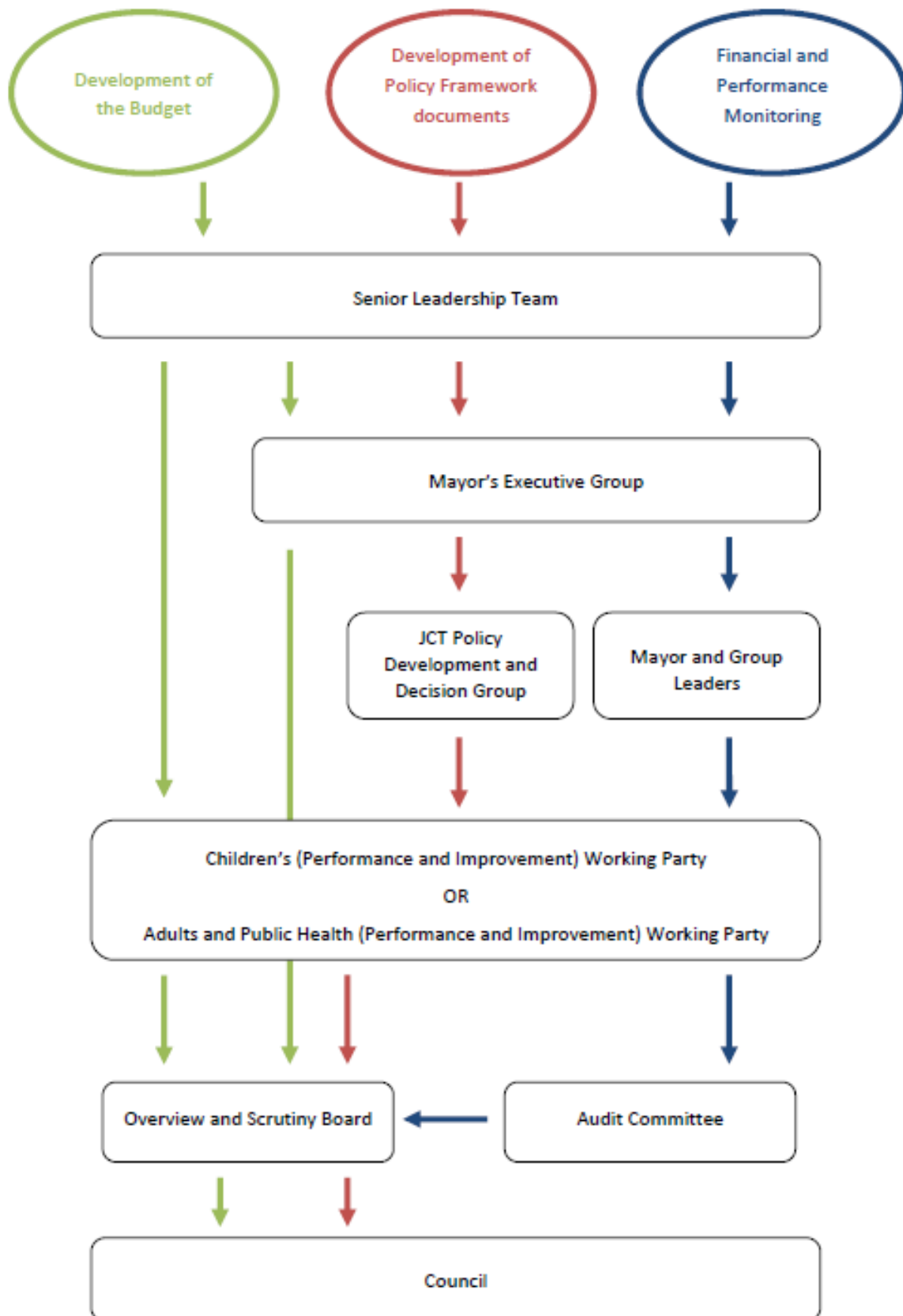
The report should provide:

- a comparison of internal audit activity during the year with that planned, placed in the context of Adult Services
- a summary of significant fraud and irregularity investigations carried out during the year and anti-fraud arrangements; and
- a statement on the effectiveness of the system of internal control in meeting the Council's objectives
 - Together with a summary of the performance indicators set for internal audit and performance against these targets.

Appendix 8 - Adult Social Care Related/Impacting Trust Wide Improvement/Savings Plans

These will be provided as part of the Operational Plan when agreed by NHS England and available for publication

Appendix 9 – Council Governance



Document is Restricted