Progress Update – EIT Review of Adult Services

No.	Recommendation	Lead Responsibility	Finance Manager	Anticipated Completion Date/ Completion Date	Quarter 1 Evidence of progress Presented to Committee on 05/09/11 (Please state current position on recommendation or alternative action taken)	Savings/Costs to Date (please state whether actual or estimated)	Assessment of progress (Categories 1-4)
1	Deletion of current Head of Adult Strategy and Head of Adult Operations	J Humphreys	M Graham	1 September 2011	2 Heads of Service posts will be deleted 31.08.2011.		2 – On Track
2	Creation of new Head of Adult Services post	J Humphreys	M Graham	1 September 2011	Head of Service appointed and will commence in post 01.09.2011.		2 – On Track
3	Subject to Cabinet approval agreement to delegate authority to the Corporate Director for Children, Education and Social Care in consultation with the Cabinet Member (Adult Services and Health) to implement the final revised staffing structure following consultation with staff and Unions with the agreed level of identified Annual savings.	J Humphreys	M Graham	1 September 2011 for appointments to all posts 1 October for Teams to be physically relocated	Implementation of staffing structure now nearing completion. Recruitment to 4 th Tier posts has taken place – social working preferencing will take place over Summer period. We are aiming for 1 October for the teams to be relocated, due to need for some building work.		2 – On Track

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4	Subject to Cabinet approval agreement to delegate authority to the Corporate Director for Children, Education and Social Care in consultation with the Cabinet Member (Adult Services and Health) to review Adult Mental Health/Learning Disabilities (MH/LD) Care Management arrangements following the outcome of the LD/MH Review of Resources.	J Humphreys	M Graham	Spring 2012	Await outcome of EIT LD/MH review before actioning		2 – On Track
	Predicted savings of Review			£440,000 Full year	Actual Savings of Review to Date (including all recommendations)	Part year savings in 2011/2012 £202,500	
Huma				No compulsory 2 members of Opportunities the establishm adults.			

Progress Update – EIT Review of Fair Access to Care

No.	Recommendation	Lead Responsibility	Finance Manager	Anticipated Completion Date/ Completion Date	Quarter 1 Evidence of progress Presented to Committee on 05/09/11 (Please state current position on recommendation or alternative action taken)	Q1 Savings/Costs to Date (please state whether actual or estimated)	Q1 Assessment of progress (Categories 1-4)
2	that the revised policy be implemented for all assessments and reassessments that take place following 1 April 2011;	HoS Adult ops Project Group	CESC lead	1.4.11	 information shared with all staff all those people currently banded as moderate have been written to Reviews commenced as planned 1/4/2011 and were completed as planned by July 2011. 		1 – Fully Achieved
3	that specific work be undertaken to ensure a consistent approach to the provision of aids and adaptations in line with the revised eligibility criteria that will take effect from 1 April 2011;	HoS Adult ops Pete Smith OT Managers	CESC lead		 PID document & project group in place. Process established for managing referrals to preventative service through Stockton Independent Living Centre (SILC) Developing pick list of approved universal items In Sensory Support – work has been completed so that 1. Readily available equipment (i.e that can be accessed from the high street at a comparable price), Sensory support team will not provide any equipment that fits into this but will give advice and information. 2. Preventative/Rehabilitation equipment This will continue to be provided to all clients regardless of their FACs banding 		2 – On Track

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					3. Equipment to assist with Activities of living This will be provided to clients who meet the FACs eligibility threshold. Anyone not meeting the threshold will be advised how to purchase equipment, and can be loaned a piece of equipment to test prior to purchasing for self.		
6	that, subject to the availability of resources, investment should take place in targeted community services, using a preventative approach and the emerging priorities outlined in the report where possible, and that particular consideration should be given to investment in assistive technology (for example Telecare);	Head of Adult Strategy Project team	CESC Finance Lead	February 2011	 Nationally investment in reablement has been announced over the next 3 years - across Health and Social Care to ensure targeted services continue and develop. We have drawn up plans with partners for the use of Reablement Monies which will be targeted at supporting hospital discharge, maintaining independence and investing further in assistive technology Dementia Innovation Fund scheme Smarter Homes incorporates Telecare to enable people with dementia to remain in their own homes. Successful 20k grant bid Additional investment into discharge support and reablement services from the reablement funding: additional health care 		1 – Fully Achieved

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					assistants to support hospital discharge; redesign of in-house home care service to provide reablement; additional capacity for discharge support through Rosedale care home; investment in home adaptations for people with long-term conditions at risk of frequent hospital admissions.		
7	that the wider corporate support initiatives to the voluntary and community sector be endorsed, and as part of this, consideration should be given to enabling this sector to focus on preventative, community services for Adults, on a sustainable basis where possible, utilising the range of programmes that have been developed e.g. the Voluntary and Community Sector Investment Fund;	Head of Strategy and Performance Head of Adult Strategy	CESC	Ongoing	 Build on prevention and early intervention workshop to work with Catalyst in implementing the strategy for the voluntary and community sector, aimed at developing and sustaining the sector, including supporting them to access future commissioning opportunities. Through the EIT review of LD?MH services the development of a community bridge builder model of inclusion is included in the baseline assessment and links to the voluntary and community sector included. 950 potential volunteers have been identified by VIVA; approximately 200 have been aligned to a specific voluntary sector organisation; social care staff are working with VIVA to look at ways in which volunteers could be involved in preventative activities, for example befriending. 		1 – Fully Achieved

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8	that advice and information services be further developed to enable signposting to community services, and that such services should be up to date and accessible, include effective promotion of community services that already exist, and be linked to the work being undertaken as part of the implementation of the EIT Review of Advice and Information, and the Personalisation implementation programme;	HoS Adult Ops EIT info / advice Lead Debbie Hurwood Peter Smith	CESC	March 2012	 The Golden Guide (Edition 3) has been re-launched and is available in libraries and contact points. Web based Directory of Adult services will go live at end August 2011. This will be managed by Family Information Service. 		1 – Fully Achieved
9	that the impact of the revised policy should be monitored through the implementation of the Action Plan from the Equality Impact Assessment;	HoS Adult Ops Project Group Performance team		September 2011	 Report was presented to Adult social care Performance clinic on 20 June outlining changing pattern of referral post FACS. Further work was required to be brought to August clinic. Sample of people not eligible under new criteria (assessed as moderate) will be audited in August / September as part of case file auditing process. 		2 – On Track

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10	that to ensure that data quality is maintained, a process should be put in place to monitor the information held in relation to clients' eligibility bandings and to keep this under review, and progress should be reported to the Health Select Committee as part of the established monitoring procedures.	CESC Performance Manager MIU Phil Kicks		October 2011	 Exception reporting process already in place for CareFirst, developed as part of the consultation and evaluation of FACs in 2009/10. Improvements to data collection were introduced on the back of these findings to ensure more consistent recording of FACs criteria at assessment. A review of FACs bandings for active clients will be run at the end of Q2. Link to new Adult Care Management system 		2 – On Track
Predi	Predicted savings of Review			£500k	Actual Savings of Review to Date (including all recommendations)	Estimate @ July 2011 260k whole year projection but this is subject to further audit as need to identify loss of income from these clients	
Huma	Human Resources Implications			None associa	ted with this review		

Progress Update – Review of Audiology

No	Recommendation	Responsibility	Anticipated Completion Date/ Completion Date	Q4 Evidence of Progress Presented on 13/06/11	Assessment of progress (Categories 1-4) 13/06/11	Q1 Evidence of Progress Presented on 05/09/11	Q1 Assessment of progress (Categories 1-4)
2	That the provision of more localised services in community settings be supported and this be considered as part of the Momentum proposals and through opportunities for the co-location of services with other providers.	Health Systems Directorate (North).	Ongoing as estate facilities become available.	Work around community developments in Stockton and Billingham continues.	2 – On Track	No further progress to report	2 – On Track