

NOTICE
OF
MEETING

**ADULTS, CHILDREN AND HEALTH
OVERVIEW AND SCRUTINY PANEL**

will meet on

WEDNESDAY, 9TH JUNE, 2021

At 6.15 pm

by

VIRTUAL MEETING - ONLINE ACCESS, ON [RBWM YOUTUBE](#)

TO: MEMBERS OF THE ADULTS, CHILDREN AND HEALTH OVERVIEW AND SCRUTINY
PANEL

COUNCILLORS MAUREEN HUNT, CHRISTINE BATESON, CAROLE DA COSTA,
AMY TISI AND JULIAN SHARPE

SUBSTITUTE MEMBERS

COUNCILLORS GARY MUIR, HELEN PRICE, CHRIS TARGOWSKI, SIMON BOND AND
GREG JONES

Karen Shepherd – Head of Governance - Issued: June 1st 2021

Members of the Press and Public are welcome to attend Part I of this meeting. The agenda is available on the Council's web site at www.rbwm.gov.uk or contact the Panel Administrator **Andy Carswell** 01628 796319

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AGENDA

PART I

<u>ITEM</u>	<u>SUBJECT</u>	<u>PAGE NO</u>
1.	<u>ELECTION OF CHAIRMAN AND VICE CHAIRMAN</u> To appoint a Chairman and Vice Chairman for the 2021/22 municipal year.	-
2.	<u>APOLOGIES FOR ABSENCE</u> To receive any apologies for absence.	-
3.	<u>DECLARATIONS OF INTEREST</u> To receive any declarations of interest.	3 - 4
4.	<u>MINUTES</u> To approve the minutes of the meeting held on April 22 nd 2021.	5 - 10
5.	<u>OPTALIS PERFORMANCE REVIEW 2020/21</u> To receive a presentation and note its contents.	11 - 24
6.	<u>END OF YEAR DATA AND PERFORMANCE REPORT</u> To note the contents of the report.	25 - 52
7.	<u>CIPFA REVIEW UPDATE</u> To note the contents of the report.	53 - 60
8.	<u>WORK PROGRAMME</u> To review and update the work programme.	61 - 62

MEMBERS' GUIDE TO DECLARING INTERESTS IN MEETINGS

Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a DPI or Prejudicial Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

A member with a DPI or Prejudicial Interest **may make representations at the start of the item but must not take part in the discussion or vote at a meeting.** The speaking time allocated for Members to make representations is at the discretion of the Chairman of the meeting. In order to avoid any accusations of taking part in the discussion or vote, after speaking, Members should move away from the panel table to a public area or, if they wish, leave the room. If the interest declared has not been entered on to a Members' Register of Interests, they must notify the Monitoring Officer in writing within the next 28 days following the meeting.

Disclosable Pecuniary Interests (DPIs) (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit made in respect of any expenses occurred in carrying out member duties or election expenses.
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the relevant authority.
- Any licence to occupy land in the area of the relevant authority for a month or longer.
- Any tenancy where the landlord is the relevant authority, and the tenant is a body in which the relevant person has a beneficial interest.
- Any beneficial interest in securities of a body where:
 - a) that body has a piece of business or land in the area of the relevant authority, and
 - b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body **or** (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

A Member with a DPI should state in the meeting: ***'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Or, if making representations on the item: ***'I declare a Disclosable Pecuniary Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Prejudicial Interests

Any interest which a reasonable, fair minded and informed member of the public would reasonably believe is so significant that it harms or impairs the Member's ability to judge the public interest in the item, i.e. a Member's decision making is influenced by their interest so that they are not able to impartially consider relevant issues.

A Member with a Prejudicial interest should state in the meeting: ***'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Or, if making representations in the item: ***'I declare a Prejudicial Interest in item x because xxx. As soon as we come to that item, I will make representations, then I will leave the room/ move to the public area for the entire duration of the discussion and not take part in the vote.'***

Personal interests

Any other connection or association which a member of the public may reasonably think may influence a Member when making a decision on council matters.

Members with a Personal Interest should state at the meeting: ***'I wish to declare a Personal Interest in item x because xxx'. As this is a Personal Interest only, I will take part in the discussion and vote on the matter.***

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Agenda Item 4

ADULTS, CHILDREN AND HEALTH OVERVIEW AND SCRUTINY PANEL

THURSDAY, 22 APRIL 2021

PRESENT: Councillors Maureen Hunt (Chair), Christine Bateson, Carole Da Costa, Amy Tisi and Julian Sharpe (Vice-Chairman)

Also in attendance: Councillors John Baldwin, Stuart Carroll and Shamsul Shelim, and Mark Jervis

Officers: Andy Carswell, Hilary Hall, Lynne Lidster, Michael Murphy and Kevin McDaniel

APOLOGIES FOR ABSENCE

Apologies were received from Derek Moss and Tony Wilson.

DECLARATIONS OF INTEREST

Cllr da Costa stated that a close family member of hers was currently using adult services, which she said she was revealing for transparency reasons.

MINUTES

RESOLVED UNANIMOUSLY: That the minutes of the meeting held on January 21st 2021 be approved as an accurate record.

Q3 PERFORMANCE REPORT

The Chairman said congratulations were in order to everyone who had enabled progress to continue as well as possible in spite of the restrictions that had been caused by Covid19.

Hilary Hall, Director of Adults, Health and Housing, introduced the report relating to adult services and noted there were five performance indicators relevant to the service that had been highlighted. Of these, three had a green indicator. Regarding care package reviews – relating to a particular package's annual review – Hilary Hall said performance was slightly below target due to resources needing to be diverted elsewhere to cope with the demands of Covid. Reviews had been prioritised and all those where it was considered necessary to had been carried out. It was expected that this performance indicator would be on target by the end of the year.

Regarding permanent admissions to care, the Panel was told this was below target but within tolerance as the number of admissions had been higher in Q3. The Panel was told that reablement – allowing people to remain in their own homes for as long as possible – had an amber rating. Hilary Hall said it was just short of target as there had been a dip in Q1, but there had been significant improvements in Q3. Carers' assessments were now meeting target; Hilary Hall reminded members that the Panel was told previously that earlier in the year assessments were not being recorded as formal reviews, but there had been lots of contact with service users. The formal paperwork and reviews had now taken place and caught up with the target. The final indicator related to safeguarding, which was on target.

Responding to questions from Cllr da Costa, Hilary Hall said care package reviews were carried out by social workers from Optalis, rather than the agency or care home associated with the service user. She added that the review also took into account the support provided for the carer. Cllr da Costa asked how quality of care was measured. Hilary Hall said packages would be monitored for complaints and if any safeguarding risks were identified.

Calls were also regularly made to service users and feedback would be taken, and there would be spot checks. Cllr da Costa asked what would happen if a service user wanted to raise a complaint but did not have a family member who could do so on their behalf. Hilary Hall stated a social worker was able to act as a quasi-family member and could ask for an increased number of visits if concerns were raised.

Cllr Tisi asked if any trends had been recognised any areas where a focus of attention may be needed. Hilary Hall said there was nothing definite at the moment, but it may be the case that the indicators themselves may need to be reviewed to get a clearer understanding. It was likely that the impact of long Covid may present the greatest challenge, in terms of how information relating to the cohort that was currently being supported, and future prevention work, would be recorded. Kevin McDaniel, Director of Children's Services, said there had been an increase in demand for front door services following the return to school as new cases were being brought to the attention of children's services later in the development of the situation than might ordinarily be expected. As a result, these tend to be more complex cases which would require being directed straight to child protection. Kevin McDaniel said it was important the right services and arrangements were in place to handle the consequences of this, and the situation was likely to develop further over the coming weeks and months.

Responding to a question from Cllr Sharpe, Hilary Hall said she did not have any areas of concern directly related to adult services. However she said she was concerned at the possible impact on residents' mental health and a possible impact on mental health services as a result. She said there had been an increase in the number of referrals, although this had not been too onerous on mental health services. Cllr Tisi asked if the effects of long Covid might impact on the demographic of people needing care. Hilary Hall said she believed this would be the case, although there had not been any evidence of it so far.

Hilary Hall said a carer's assessment would also take into account the needs of the person providing the care and seeing what support was appropriate to give them, such as respite or support in the home. There had been an increase in the number of people providing support to someone in their own home. Anyone could make a referral for a carer's assessment.

Kevin McDaniel introduced the report relating to children's services and told the Panel that the six performance indicators all had a green rating. The Panel was reminded that a task and finish group had looked at the virtual college's work with care leavers, and work was taking place to encourage businesses to consider employing care leavers as the Covid pandemic had led to a lack of jobs for them. There had been an improvement in the performance indicator for health visitor assessments, as families had been more engaged using a virtual communication system while their children were not accessing as many face to face services.

Regarding graded Ofsted inspections of schools, Kevin McDaniel said none had been carried out since March 2020 and it was expected that none would be done before September 2021. Four schools had been visited but not as part of an assessment that would result in a formal grading; however the feedback from these had been positive in terms of supporting the school's most vulnerable children and remote learning. An Ofsted inspector had been seconded to RBWM to help share best practice during the first national lockdown period.

The Panel was told there had been a reduction in the number of families that had been re-referred to social care within 12 months of their original care ending. Kevin McDaniel said the early help service had been able to provide more targeted one to one work, and there had been improved consideration of how services would follow up with families. He added the number of families involved was relatively small. Regarding children whose children protection plan lasted for more than two years, Kevin McDaniel said he was pleased the number was currently zero and work was taking place to ensure there was no drift in cases to maintain this level of performance.

In relation to special educational needs and disability, Kevin McDaniel said the focus of the work was to ensure Education Health and Care Plans were of a high quality. There had been

an increase in the number of requests for an EHCP and it was possible this service may come under some stress. Cllr Tisi noted many children were not eligible for an EHCP and asked how the impact on these children was measured. Kevin McDaniel said that if a child had an identified educational need, the school would implement a localised plan for that individual as a recognised "SEN K" child. The education psychology service was available worked once a year with schools to support planning for such children, which in turn helped to share best practice amongst schools.

Cllr Tisi asked if the improvement in the number of care leavers now in education or employment could be attributable to the virtual college. Kevin McDaniel agreed this was a factor, along with the timing of the report as it came after schools had finishing for the year.

Regarding referrals to children's social care, Kevin McDaniel explained that there was a system anomaly which was being reviewed to ensure the data was consistent.

Cllr da Costa said she and Cllr Tisi had both been impressed with the new officer at the virtual college and the statistics they had produced. She noted there were no child protection plans lasting for more than two years and asked for more information. Kevin McDaniel said child services would work with a family to eliminate any identified risk; if this did not work then alternatives would be considered and discussed with the family. A child protection plan was intended to last for a short time only rather than the entirety of a child's life, and a child protection plan should make a sustainable difference to that child.

Cllr Sharpe asked how the impact of Covid on schools was being measured and recorded. Kevin McDaniel said there would be an annual report on what was and wasn't working, which was due to be published in early 2022. It was noted that many children were excited and enthusiastic to be returning to school, and many vulnerable children had achieved well during the course of the pandemic. Kevin McDaniel said Sir Kevan Collins had been appointed by the government to lead a steering group scrutinising how learning would be restored in schools.

Hilary Hall told the Panel there were three performance indicators relating to public health, including successful completion of substance misuse programmes. These were all on target to be met. Hilary Hall said virtual consultations had been introduced because of the pandemic, but this had improved engagement and service users had been more committed to completing their programme. This contract was due to be recommissioned from April 1 2022. Cllr Sharpe suggested some residents may suffer increased stress or anxiety as a result of Covid and turn to drink or drugs as a coping strategy. Hilary Hall said there was no specific evidence to suggest this, but there would be a clearer picture over time and it was something that was being taken into consideration. Cllr Carroll said there had been a good performance in terms of resilience for services and it was hoped this would continue to evolve. He said this would be incorporated into the Council's homelessness and mental health strategies.

RESOLVED UNANIMOUSLY: That the Panel noted the report and:

- i) Noted the 2020/21 Adults, Children and Health Overview and Scrutiny Panel Q3 Performance Report in Appendix A.**
- ii) Requested relevant Lead Members, Directors and Heads of Service to maintain focus on improving performance.**

JOINT HEALTH AND WELLBEING STRATEGY

Hilary Hall advised the Panel that the Joint Health and Wellbeing Strategy had been formally signed off by the Health and Wellbeing Board two days previously, and that this was a statutory requirement. The strategy had been developed with input from the Frimley Integrated Care Strategy. Previously the RBWM strategy had had 12 objectives but as these were wide-ranging and difficult to track they had been replaced by four key priorities. There was now less of a focus on delivering new services; instead new ways of joining up strategies and maximising what was already in place were being prioritised, although there was still scope for new services to be introduced if needed.

Cllr Sharpe said the new strategy was very ambitious and the right sort of thing to aim for; however he asked how this strategy differed from the previous one and what would happen if the targets were not achievable. Hilary Hall said the previous 12 objectives had all related to operational matters, whereas the new priorities would provide a clearer focus on the work that was actually taking place. Hilary Hall and Kevin McDaniel both said the targets were aspirational and long-term, and could take several years to become fully embedded. Following a question from Cllr Bateson, Hilary Hall confirmed neighbouring councils and health colleagues had been consulted prior to the strategy being agreed.

Cllr da Costa said she was pleased the strategy was so long-term, as often plans would only be implemented for a four-term period in between elections. Following a request from the Chairman, it was agreed Cllr Carroll would take forward to Cabinet that the strategy's long-term focus would be to 2025 and beyond.

It was noted that the term 'high level actions' mentioned at 2.5 of the main report should not have been included and should say 'detailed delivery plans' instead.

Cllr Tisi noted that domestic abuse had been listed as an area of challenge that needed combatting, and asked if this had been identified as a particular issue. Hilary Hall said there had been a recent increase and lockdowns caused by Covid had exacerbated the issue; however it had been included as it impacted on children's and adult services and it was felt it would be wrong not to include it. Kevin McDaniel said examples of domestic abuse included controlling and/or coercive behaviour, and not just physical violence. Cllr Carroll said it was important people were able to spot the signs of domestic abuse, and the Council would work with the police to bring perpetrators to account.

Cllr Carroll said the strategy and the new performance priorities would enable the Health and Wellbeing Board to measure its progress. He said he would be working with Cllr Stimson as part of her role with climate change and sustainability, as the right environment would lead to improved outcomes for all.

RESOLVED UNANIMOUSLY: That the Panel noted the report and noted the new Joint Health and Wellbeing/Place Strategy 2021-2025.

OVERVIEW AND SCRUTINY PANEL ANNUAL REPORT

RESOLVED UNANIMOUSLY: That the contents of the Annual Report be approved and passed for consideration at Full Council.

WORK PROGRAMME 2021-22

The Chairman reminded the Panel that all members had been asked to contribute suggestions for the work programme, and many of these had been scheduled for dates for the forthcoming year following discussions with officers. She expressed thanks to officers for their help in developing the work programme.

The Chairman said a report regarding youth groups – outlining which groups there were and how they helped young people and contributed to the Council – had been proposed but no date had been set for it. She also suggested a task and finish group looking at the recommissioning of domiciliary care services. The Chairman noted from the minutes of the last meeting that Cllr Sharpe had remarked that although value for money needed to be taken into consideration when creating care packages, this should not be to the detriment of the level of care provided and the focus should be on providing the appropriate level of care. She suggested a task and finish group could review this, and this suggestion was agreed by members.

Cllr Tisi suggested the item on youth groups could be considered outside of the Panel via email. Cllr Hunt said she felt it would not be possible to scrutinise decisions if members were not aware of all of the groups and what they did. Kevin McDaniel said youth services were in the process of being restructured as part of the family hubs work and notional budgets would be defined as a result. This would be sent to members as soon as possible for discussion in its own right. Cllr da Costa said the family hub strategy was being implemented and suggested a review could be included as an agenda item for the meeting in April 2022.

The meeting, which began at 6.15 pm, finished at 7.35 pm

CHAIRMAN.....

DATE.....

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Optalis Performance Review 2020/1

**“Thank you for keeping
us safe”
Optalis customer**

Our shared **vision** with RBWM for adult social care is:

***To enable people in the Royal Borough of Windsor and Maidenhead to
live independent and fulfilled lives.***

Our shared key **principles**....

Prevention

Embedding
prevention to
avoid crisis and
loss of
independence

Community

Investing in
communities and
their assets and
connecting
individuals to
them

Choice

Shaping solutions
around outcomes
that matter to
individual people

Values

Treating everyone
with compassion,
respect and
dignity

We operate more than 20 different care services for residents across the Royal Borough, including:

- Day services for people with learning disabilities
- Supported/independent living and extra care services
- Dementia and respite services
- Reablement and hospital discharge
- Occupational therapy
- Safeguarding coordination
- Governance and Quality Assurance
- Integrated care (with NHS) for people with mental health issues
- Brokerage and support
- Support for older people and physical disabilities
- Integrated care (with NHS) for people with learning disabilities and autism
- Supported employment training for people with learning disabilities and autism

Pandemic Performance

- **Keeping our customers and staff safe** – over the last 15 months, we have not lost a single customer or member of staff to a Covid infection picked up in our services.
- **Maximising hospital bed availability** – our social work, reablement and occupational therapy teams helped to relieve the pressure on NHS beds at the height of the pandemic by discharging 53% more people than last year from local hospitals safely and efficiently between January and April 2021.
- **Supporting minorities** – many of our staff and customers are from minority groups for whom health inequalities and vaccine hesitancy have been a concern. Working with health colleagues, we have supported these groups through tailored risk assessments and vaccine education sessions delivered by clinical pharmacists
- **Service challenges** – mandatory Covid restrictions caused issues for some residents who depend on our day services. Wherever possible, we have provided alternative support for these customers.

Pandemic Learnings

- **We need to review traditional ways of doing things** – the pandemic unexpectedly highlighted opportunities to do things differently. For example, customer feedback during the pandemic confirmed that we need to increase the range and variety of day service opportunities that we offer to residents.
- **Our people are willing to initiate and embrace change** – our teams showed exceptional resilience on the Covid front line in a volatile, uncertain, complex and ambiguous environment. They also showed themselves to be highly flexible and open to suggesting new ways of working. We must encourage and embed this.
- **Working seamlessly with the Royal Borough and local health teams is the way forward** – working together in adversity showed us how much we can achieve when we join forces and support each other – e.g. our joint response to vaccine hesitancy; PPE supplies; discharging people from hospital.

15



Operational Performance

- **Business as usual** – in addition to the extra challenges of the pandemic, we have also ensured that all our services have continued to operate to the high standards required by the Care Quality Commission (CQC) and the Care Act. The quality of our infection control procedures was specifically noted by CQC.
- **Rehabilitation** – the percentage of customers who received rehabilitation support on leaving hospital who subsequently were at home 91 days later stayed consistent, with over 80% of customers not returning to hospital within three months of discharge.
- **Finances** – we delivered our services across the Royal Borough in 2020/21 for £0.5m less than budgeted, through a combination of efficiencies and Covid grant funding.
- **New and expanding services**
 - The Extra Care service at Lady Elizabeth House in Maidenhead successfully transferred to Optalis at the end of 2020.
 - The Supported Employment service previously delivered by Ways into Work moved to Optalis in April 2021.
 - We are investing to grow our specialist reablement service, so that more local people can live safely and independently for longer.

Analysis of performance

Hospital discharges 50% higher than winter 2020

Month	Number of patients discharged 2020	Number of patients discharged 2021
January	109	179
February	112	166
March	102	150

An increased number of people were discharged from Hospital during the first 3 months of 2021 safely and rapidly. This was down to the Hospital staff; Hospital Social Work team; support from CCG, CQA and Commissioning; and most importantly Providers. It is an exemplary success of cooperation under extreme circumstances.

Analysis of performance

Success and Good News Stories

Access to PPE

- This relationship successfully supported PPE delivery to all providers in need of emergency PPE from March – April 2020 while the wider system response through the Local Resilience Forum (LRF) was safely established and PPE distribution could be centralised within the LA.
- Providers are encouraged to use their regular supply chains to source Personal Protective Equipment (PPE).

Capacity Tracker (CT) Support

- Providers were supported and provided regular updates on completing the CT.
- Provider calls were set via CT weekly to raise issues.

Testing and antibody testing

- Testing requirements on a weekly basis to review the position of Care Homes in relation to notification of outbreaks of Covid, receipt of testing kits and test results in order to prioritise whole care home testing.

Digital offer

- Laptops, iPads and pilot for Connected Care.
- Online and virtual consultations and residents and their family keeping touch.

optalis
choices for living

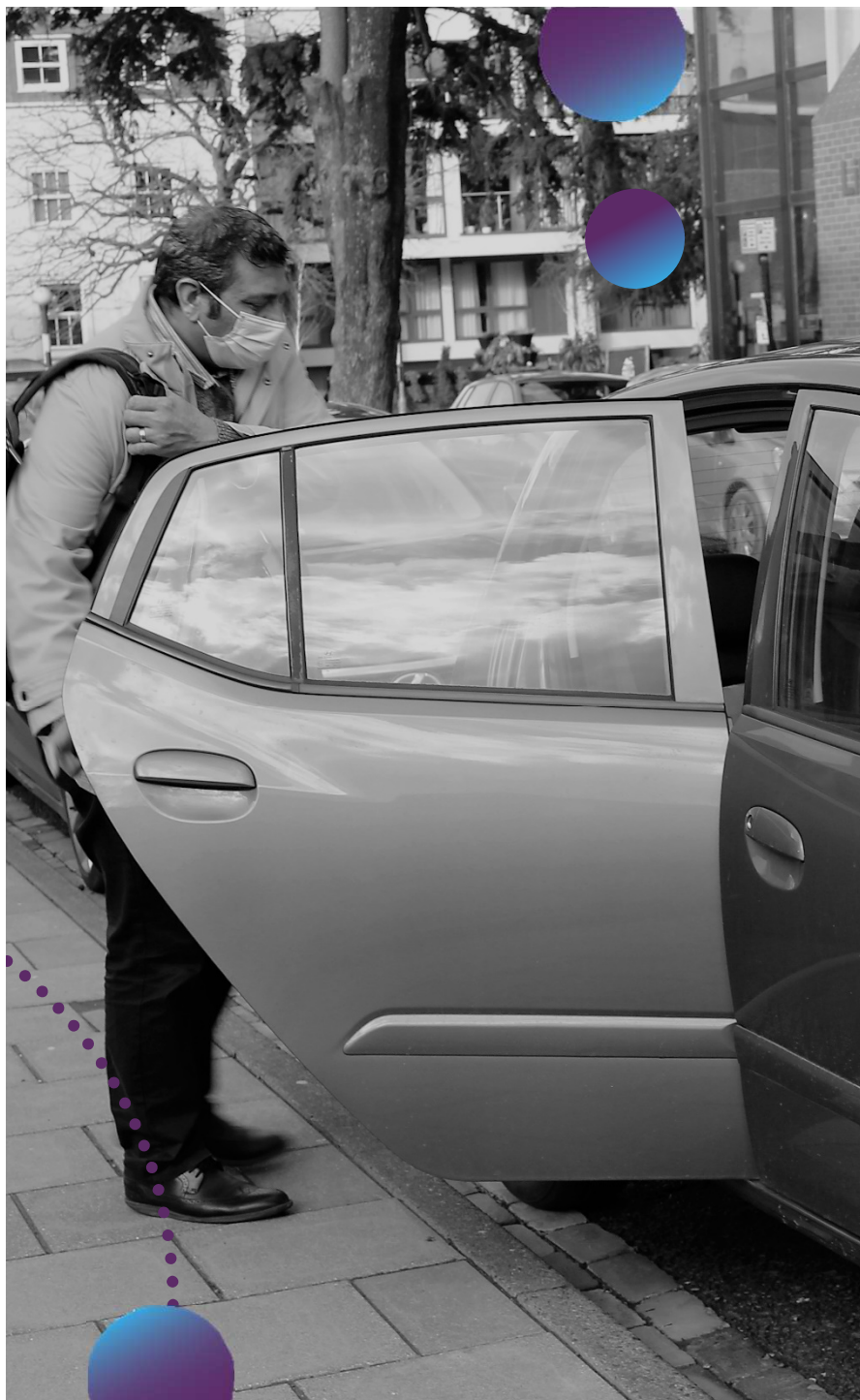
Transforming Optalis





‘Front Door’

By redesigning the point of entry to our services, we will make it as easy as possible for residents in crisis to access the services that they need.



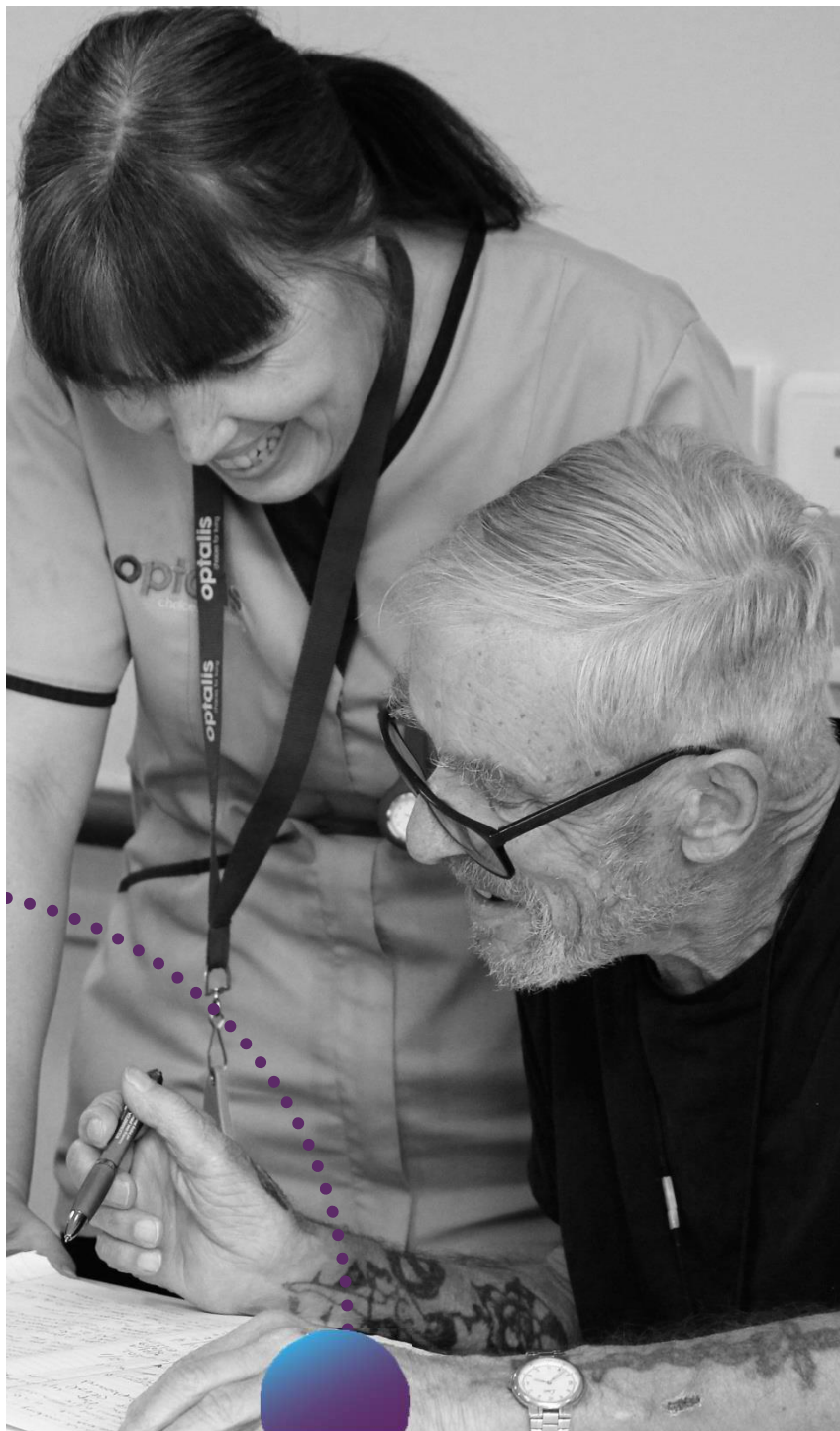
Prevention

We will find ways to reduce the number of people in crisis across the Royal Borough, through earlier interventions and new forms of support. This will require close collaboration with local voluntary and charitable organisations, our health colleagues and other stakeholders such as the police and community wardens



Community Lives

We will continue to enhance and refine the range of day services across the Royal Borough, including a new Out & About service, use of technology tools and a programme of continuous improvement reflecting residents' needs.



New ways of providing care

We will continually research ways to enhance the care we provide and monitor best practice elsewhere. Our intention is to become a national beacon of excellence in the provision of adult social care.



Thank You

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Report Title:	2020/21 End of Year Data & Performance Report
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	
Meeting and Date:	Adults, Children and Health Overview and Scrutiny Panel, 9 June 2021
Responsible Officer(s):	Hilary Hall, Executive Director of Adults, Health and Housing Kevin McDaniel, Executive Director of Children's Services
Wards affected:	All

www.rbwm.gov.uk



REPORT SUMMARY

- The Council Plan 2017-21 and associated strategic priorities remained current up to 30 July 2020 when Cabinet approved an Interim Council Strategy 2020/21 for immediate adoption on the basis that the Covid-19 pandemic had significantly altered the context in which the council is currently operating.*
- The Interim Council Strategy clarifies the three revised priorities to which the council is responding. The End of Year Data & Performance Report for Adults, Children and Health Overview and Scrutiny Panel provides insights into the Interim Council Strategy's delivery as fully as possible, see Appendix A. Performance of measures previously reported to the Panel under the Council Plan 2017-2021 are included on the basis that these measures provide insights into current service delivery.*

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That the Adults, Children and Health Overview and Scrutiny Panel notes the report and:

- Notes the 2020/21 Adults, Children and Health Overview and Scrutiny Panel End of Year Data & Performance Report in Appendix A.**
- Requests relevant Cabinet Members, Directors and Heads of Service to maintain focus on improving performance.**

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

Options

Table 1: Options arising from this report

Option	Comments
Accept the recommendations in this report. This is the recommended option	This will allow continuing insight into the delivery of the council's agreed priorities in order to aid decision-

Option	Comments
	making and maintain focus on continuous improvement.
Not accept the recommendations in the report.	The failure to use relevant performance information to understand delivery against the council's agreed priorities impedes the council's ability to make informed decisions and seek continuous improvement.

- 2.1 The Council Plan 2017-21 remained current up to 30 July 2020 when Cabinet approved an Interim Council Strategy 2020/21 for immediate adoption on the basis that the Covid-19 pandemic has significantly altered the context in which the council is currently operating. The Interim Council Strategy clarifies the three revised priorities to which the council is responding, acknowledging that any instances where previous objectives can still be delivered without affecting delivery of interim objectives is a good thing and will be supported.
- 2.2 Appendix A provides insights into the Interim Council Strategy's three priorities and how they are progressing. It details the council's ongoing response to the Covid-19 pandemic and also key updates in relation to major workstreams such as the Transformation Strategy, Environment and Climate Strategy, alongside corporate developments relating to the People Plan and Medium-Term Financial Strategy.
- 2.3 The global pandemic was a situation that no one envisaged and would ever have wished for. It did, however, galvanise the community into action to work together to support those that were clinically extremely vulnerable and others who needed support. Within weeks of the outbreak, RBWM was home to some 76 community-based initiatives, with localised community hubs comprised of public sector partners (e.g. Local authority, GPs, Social Prescribers), faith groups, charities, businesses, Elected Members and local neighbours, all working in unison to support local need. Supported by a new centralised call-centre, set up within just 10 days, over 20,000 calls were made to vulnerable residents and the council facilitated – both practically and financially – the running of localised hubs with the power for decision-making largely decentralised amongst these groups.
- 2.4 This “grass roots” model of localised support has not only allowed the needs of the vulnerable to be adequately supported during the pandemic but has stimulated an increase in local resilience and connectivity in a way that traditional “command and control” responses are unable to. In total, the support for residents covered 374 days and was delivered by more than 150 council staff, backed up by more than 1,000 volunteers, 150 community information champions and 70 community groups.
- 2.5 The impact of Covid on the community and the economy has been felt in a number of areas of the council's operations, and this has been reflected in the council's key performance indicators throughout the year. For example, the resilience of families was significantly tested during the Covid restrictions which led to an increase in referrals to children's social care; our care leavers' ability

to secure employment was impacted by businesses – particularly in the leisure industry – being closed and the review of long-term cases was impacted by the diversion of resources to the Covid-19 response.

- 2.6 Table 2 summarises the position of all reported key performance indicators as at the close of Q4. Despite the challenges presented by the pandemic it is encouraging to note that all indicators are on or near target. Appendix A sets out performance trends and related commentary for each indicator. All indicators continue to be monitored and reported to relevant Overview and Scrutiny Panels on a quarterly basis as part of an ongoing performance dialogue.

Table 2: Summary KPI End of Year position

	Green (Succeeding or achieved)	Amber (Near target)	Red (Needs improvement)
Percentage long term cases reviewed in the last 12 months		X	
No. permanent admissions to care for those aged 65+yrs		X	
Percentage rehabilitation clients still at home after 91 days		X	
Percentage carers assessed or reviewed in the last 12 months	X		
Percentage safeguarding service-user satisfaction	X		
Percentage care-leavers in education, training and employment (19-21yr olds)	X		
Percentage eligible children receiving a 6-8wk review within 8wks	X		
Percentage borough schools rated by Ofsted as Good/Outstanding	X		
Percentage re-referrals to Children's Social Care (within 12mths)		X	
Percentage children subject to a Child Protection Plan for 2+yrs on ceasing		X	
Percentage EHCP assessments completed within 20wks (including exceptions)	X		
Percentage of successful treatment completions (alcohol)	X		
Percentage of successful treatment completions (opiates)	X		
Percentage of successful treatment completions (non-opiates)		X	
TOTAL (14)	8	6	0

3. KEY IMPLICATIONS

3.1 The key implications of this report are set out in table 3.

Table 3: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
The council is on target to deliver its strategic priorities	< 100% priorities on target	100% priorities on target			31 March 2021

4. FINANCIAL DETAILS / VALUE FOR MONEY

4.1 There are no direct financial implications arising from the recommendations.

5. LEGAL IMPLICATIONS

5.1 There are no legal implications arising from the recommendations.

6. RISK MANAGEMENT

6.1 The risks and their control are set out in table 4.

Table 4: Impact of risk and mitigation

Risk	Level of uncontrolled risk	Controls	Level of controlled risk
Poor performance management practices resulting in lack of progress towards the council's agreed strategic priorities and objectives.	HIGH	Robust performance management within services to embed a performance management culture and effective and timely reporting.	LOW

7. POTENTIAL IMPACTS

7.1 There are no Equality Impact Assessments or Data Protection Impact Assessments required for this report. There are no climate change or data protection impacts as a result of this report.

8. CONSULTATION

- 8.1 Performance against the strategic priorities is regularly reported to the council's four Overview and Scrutiny Panels. Comments from the Panels are reported to Cabinet Members, Directors and Heads of Service as part of an ongoing performance dialogue.

9. TIMETABLE FOR IMPLEMENTATION

- 9.1 The full implementation stages are set out in table 5.

Table 5: Implementation timetable

Date	Details
Ongoing	Comments from the Panel will be reviewed by Cabinet Members, Directors and Heads of Service.

10. APPENDICES

- 10.1 This report is supported by one appendix:
- Appendix A: Adults, Children and Health Overview and Scrutiny Panel End of Year Data & Performance Report.

11. BACKGROUND DOCUMENTS

- 11.1 This report is supported by one background document:
- Interim Council Strategy 2020/21:
<https://rbwm.moderngov.co.uk/ieListDocuments.aspx?CId=132&MId=7763&Ver=4>

12. CONSULTATION (MANDATORY)

Name of consultee	Post held	Date sent	Date returned
Hilary Hall	Executive Director of Adults, Health and Housing	12.05.2021	13.05.2021
Kevin McDaniel	Executive Director of Children's Services	12.05.2021	13.05.2021

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
Non-key decision	No	No

Report Author: Report Author: Rachel Kinniburgh, Strategy and Performance Team Leader, 01628 796370

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Adults, Children and Health Overview and Scrutiny Panel

2020-21 End of Year Data & Performance Report

April 2020 – March 2021

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1. Executive Summary

- 1.1 The Council Plan 2017-21 remained current up to 30 July 2020 when Cabinet approved an Interim Council Strategy 2020/21 for immediate adoption on the basis that the Covid-19 pandemic has significantly altered the context in which the council is currently operating.
- 1.2 In the interests of good governance and transparency, the Interim Council Strategy gives clarity to the three revised priorities to which the council is responding, acknowledging that any instances where previous objectives can still be delivered without affecting delivery of interim objectives is a good thing and will be supported. The three revised priorities for 2020/21 are:
 - **Covid-19 objectives:** focusing on the immediate response, long-term recovery, and new service requirements.
 - **Interim Focus Objectives 2020-21:** focusing on revised service operating plans, development of the Transformation Strategy, Climate Strategy, Governance, and People Plan.
 - **Revised Medium Term Financial Strategy:** focusing on the impact of Covid-19, economic downturn, and government policy.
- 1.3 With the introduction of the Interim Council Strategy, performance reports for 2020/21 have necessarily been refocused to respond to this strategy as fulsomely as possible at the current time. This report is therefore structured to provide insight into the three priorities and how they are progressing (section 2).
- 1.4 Performance of measures previously reported to the Adults, Children and Health Overview and Scrutiny Panel are also included (section 3) on the basis that these measures provide some insights into service delivery (priority 2). These measures are grouped in this report by the lead service.

2. Interim Council Strategy: Delivery of priorities

2.1 This section provides a brief overview of key activities and milestones achieved by the council in 2020/21.

PRIORITY:	COVID-19 OBJECTIVES
Item	Achievements and key milestones
Response (immediate)	<p>Community response and Clinically Extremely Vulnerable (CEV) Residents: Official shielding was lifted for more than 8,000 residents – some 6% of the population – in April 2021. This brought to an end an innovative community partnership protecting our CEV residents from Covid-19. From the outset of the first lockdown in March 2020 a coordinated team of staff, drawn from all services in the council, maintained regular contact with residents who were shielding and took any appropriate action to ensure that these individuals' needs were met.</p> <p>A public-facing online directory of Covid-19 Support Groups was quickly developed to direct residents to community-based support options for particular needs, and a series of financial grants were provided to community groups for their ongoing projects of collecting prescriptions, running shopping services and befriending schemes. A new, flexible digital telephony solution was set up from April 2020 to support redeployed staff's long-term contact with CEV residents and over 20,000 calls were made. A new database (Lyon) was developed to manage interactions with CEV residents and anyone seeking help and support in the community. Lyon also enabled registration of individuals wishing to volunteer their time to the community effort and enabled the council to make required data returns to central government.</p> <p>Local community hubs of public sector partners (including GPs and social prescribers), faith groups, charities, businesses, Elected Members, and local neighbours were established and worked in unison to support local need. We gave these local hubs practical and financial help to get up and running, and the power to make decisions themselves as they were better suited to know exactly what their communities needed. In total, the support covered 374 days and was delivered by more than 150 council staff, backed up by more than 1,000 volunteers, 150 community information champions and 70 community groups.</p> <p>The Winter Support scheme provided £45,000 to seven local groups to support vulnerable families and individuals through the worst of the cold weather. A further £230,000 was distributed through food vouchers to families registered for free school meals to cover Christmas, winter half-term and Easter holiday times. These vouchers supported 2,037 unique children in the borough.</p>
Response (immediate)	<p>Outbreak Control Plan and Local Outbreak Engagement Board: The Outbreak Control Plan Summary was published on the RBWM website on 30 June 2020 in line with national instruction from the Department of Health and Social Care. The plan was produced in collaboration with the NHS and Public Health to guide our response to the ongoing Covid-19 pandemic, to put in place measures to identify and contain outbreaks and to protect the public's health. The first public meeting of the Local Outbreak Engagement Board was held on 18 January 2021. The Engagement Board convenes monthly and is a subgroup of the Health</p>

	and Wellbeing Board, established to provide public-facing engagement and communication for outbreak response.
Response (immediate)	Community Influencers and Community Information Champions: In October 2020 a new “community influencers” group was established with representatives from across various RBWM departments, including Achieving for Children, Libraries and Environmental Health. The group’s aim is to communicate key Covid-19 messages to the wider community, whilst targeting messaging to specific demographic groups based on analysis of key data-sets. The group launched its “Community Information Champion” scheme in November 2020, through which members of the community can volunteer themselves to receive regular information from the council regarding Covid-19 and then share this information with their family, friends and other contacts. This approach ensures greater transmission of key Covid-19 messages across the community where other council communication methods may not have reached. Champions can also feedback to the council any questions or requests for clarity from the community. This two-way relationship helps the council to refine its Covid-19 messages and to also dispel any myths that may be circulating regarding the virus. To date, a network of 150 Champions has been established.
Recovery (long-term)	<p>The council has worked in partnership with organisations across the Thames Valley to develop a recovery framework across the region. A set of actions for Berkshire is being developed to enable sharing of best practice and coordination of activity where it is most appropriately undertaken at a county-level.</p> <p>RBWM Recovery Strategy: On 24 September 2020 Cabinet approved the RBWM Recovery Strategy (targeted at borough-level) to move into delivery phase. The strategy sets out the council’s approach to supporting residents and businesses, empowering communities to thrive and building lasting partnerships with businesses</p>
Recovery (long-term)	Local Contact Tracing Service: The council set up a local contact tracing service which started operating in November 2020 to complement the national NHS Test and Trace service. Operating 7 days a week, the service reaches out to residents who have tested positive for Covid-19 but who have not been successfully contacted by the national NHS Test and Trace system. The purpose of LCT is to ensure they get in touch with as many positive cases as possible, to aid them in their isolation and in order to obtain details of their contacts and specific high-risk locations that they visited, therefore potentially reducing further transmission within the community and the spread of covid-19. As of the end of March 2021 there were 847 cases in total which had been contacted by the LCT team, which amounted to 1,290 calls.
Recovery (long-term)	<p>Lateral flow tests: From 8 February 2021 rapid Covid-19 test centres opened in Braywick Leisure Centre and Windsor Leisure Centre, offering 30-minute lateral flow tests (LFDTs) initially to people working in public-facing roles who do not have Covid-19 symptoms. The purpose of the tests is to identify asymptomatic carriers of the virus. In the first week of operation 1,210 people were tested across both sites.</p> <p>Following an announcement by the Prime Minister in April 2021, anyone is now able access the LFDT at the centres, or to pick up a home-testing kit or get a rapid Covid-19 test at Braywick or Windsor Leisure Centre as</p>

	lockdown restrictions are eased. A mobile unit now provides for the public to collect home-testing kits is also operating from the Ascot Racecourse carpark on Mondays and Wednesdays, 8-12pm. The arrangements for the LFDT centres at Braywick and Windsor Leisure Centres is provisionally set until 30th June, however this is kept under review as progress along the government Roadmap is tracked and restrictions are eased. It is expected that home testing kits will continue to be available after this date, but the details of the arrangements for the various strands of community-based testing are continuing to evolve.
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PRIORITY:	INTERIM FOCUS OBJECTIVES 2020-21
Item	Achievements and key milestones
Revised Service Operating Plans	<p>As part of the organisational recovery strategy, service-level step-up plans were implemented, as were changes to existing operating models to allow services to continue in a socially-distanced and safe way. One example has been our new alternative operation in the library service to be able to provide a Covid-safe environment. We introduced a phased opening up of services, focussing on a “click and collect” and “click and deliver” service initially alongside a resumption of home-delivery services. There has been a further opening up of services in two main sites including bookable access to PCs and browsing for books to ensure there is a balance between accessing services whilst protecting the health and wellbeing of our residents and staff.</p> <p>A key concern of the last 12 months has been the disruption to household waste and recycling collections. The impact on residents has had a knock-on effect on the volume of calls to the customer contact centre and the online “report it” function. The council continues to work with its contractor to improve the service and bring in strategies to help with climate change.</p>
Transformation Strategy	<p>The Transformation Strategy 2020-2025 was unanimously approved by the Cabinet Transformation Sub-Committee on 22 September 2020. The strategy’s development responds to key challenges surrounding the council’s financial position and builds upon the strong foundations of innovation and community-empowerment that quickly developed in response to the Covid-19 pandemic. The Strategy aims to deliver radical changes to the way in which the council operates and identifies 6 key areas for transformation (culture, environment, prevention, digital, process redesign and finance).</p> <p>Action plans by which to deliver the Strategy are presently being developed. Whilst Covid-19 has impacted progress, a number of projects have been implemented, proving that design and innovation can be done quickly and in an agile fashion. Asset Based Community Development methods have been used to deliver the Embedding Community Response project in Clewer and Dedworth. This project has created a blueprint for the council to work with communities to co-produce and co-design ways of delivering community projects. As the year progresses this will be rolled out in all areas of the borough. The Transformation Team is also engaging with other strategies to inform and understand how the framework can help with delivery of corporate plans.</p>

Environment and Climate Strategy	Following a public consultation, the updated Environment and Climate Strategy was approved by Cabinet on 17 December 2020. We are now working across different council services and with stakeholders to deliver the actions set out within the strategy's 5-year delivery plan. We have already been successful in securing over £1.2m in grants to support delivery of the strategy.
Governance	<p>A new full-time Monitoring Officer and Deputy Director of Law and Strategy joined the council in February 2021 to lead a new Governance, Law and Strategy Directorate and to bolster the council's governance capability. The Directorate is currently leading the development of the council's new Corporate Plan. A Statutory Officers Group has been formed and meets on a regular basis to action issues of concern and promote a strong governance and decision-making culture at the authority. This Group reviews the effectiveness of current arrangements and champions best practice whilst feeding into the Annual Governance Statement.</p> <p>Following the CIPFA financial governance reviews and detailed action plans that were developed during the year in relation to finance and pension fund governance, detailed action plans have been developed, monitored and reviewed throughout the year. All actions for the finance governance review have been started and almost all actions completed in year. For the pensions action plan these are reported to the Pensions Fund Committee and over half have already been completed and the rest are expected to be completed to the timelines agreed.</p>
People Plan	<p>A key foundation of the council's future People Strategy is the agreement of organisational values to govern how we work and behave everyday. Following extensive staff consultation, a suite of new values was launched on 19 June 2020, each underpinned by illustrative positive behaviours. The new values are:</p> <ul style="list-style-type: none"> • Invest in strong foundations • Empowered to improve • One team and vision • Respect and openness. <p>An activity plan will incorporate all of the initiatives that are developed to deliver against our People Strategy. This will be a dynamic tracker and will include the outcomes and/or outputs of initiatives such as those to implement the values. For example, "Crucial Conversations" training on how to challenge behaviours contrary to our values was rolled out for all staff between November 2020 and January 2021.</p> <p>The staff survey was conducted in November 2020, and the results analysed. A further staff survey was launched by the staff-led Equality, Diversity and Inclusion Network in March 21 to gain specific insights into perceptions of equality, diversity and inclusion in the council. The results are presently being analysed. Both sets of results will feed into the activity plan underpinning the People Strategy as appropriate.</p>

PRIORITY:	REVISED MEDIUM TERM FINANCIAL STRATEGY
Item	Achievements and key milestones
Revised Medium Term	An extraordinary Council meeting was held on the 14 October 2020 to discuss a refreshed Medium Term Financial Strategy. The actual strategy

Financial Strategy	had not been changed (other than to update any factual changes around dates and technical updates) but the financial modelling was updated to reflect the latest information as we currently know it, changes in assumptions around central government funding, inflation assumptions and other emerging issues. This formed the start of the budget-setting process for 2021/22 and the supporting Medium term financial plan. The draft budget for 2021/22 was discussed at Cabinet on 17 December 2020 and subsequently published on 22 December 2020 for consultation. This draft budget was also considered by all Overview and Scrutiny Panels in January 2021 and approved at Full Council on 23 February 2021.
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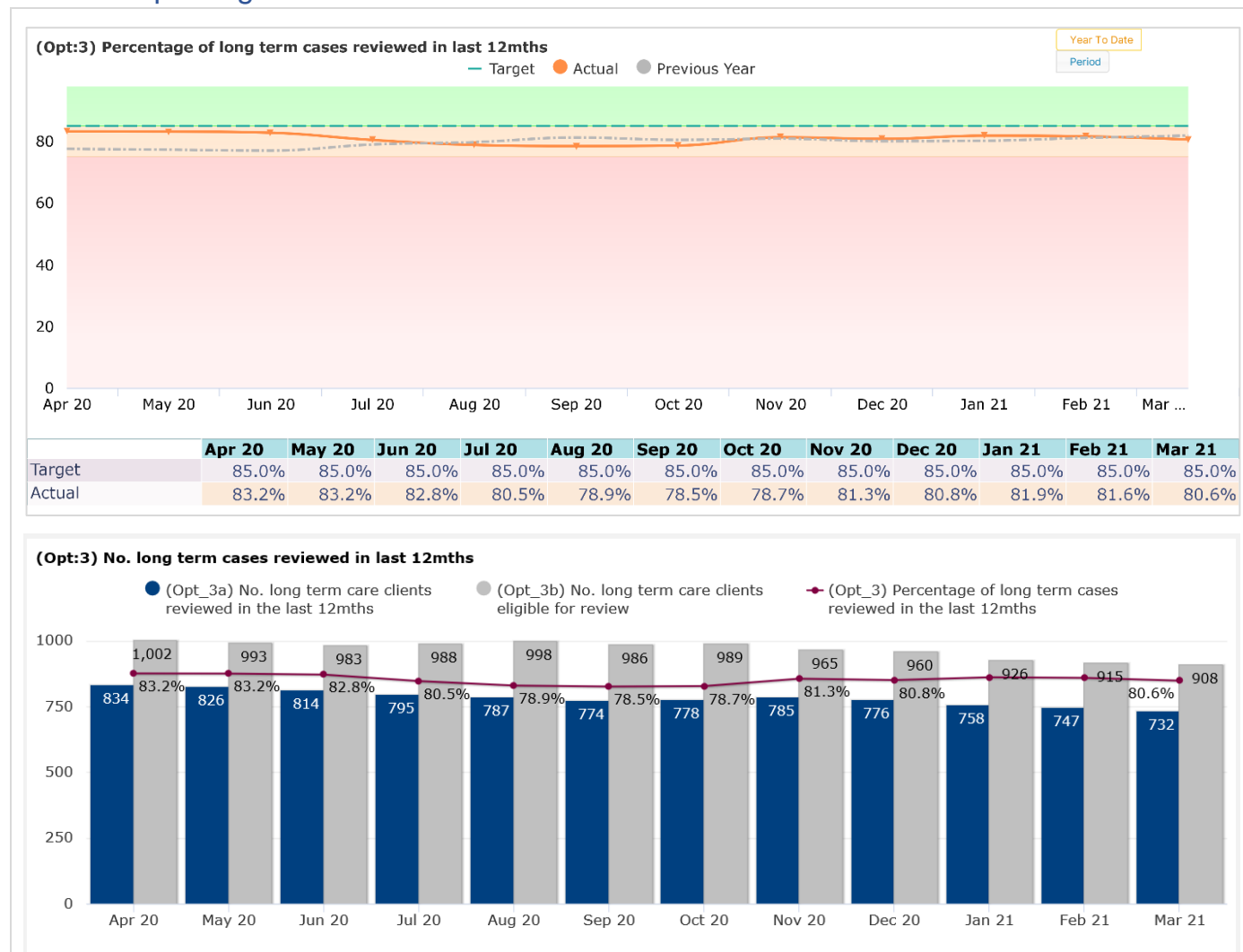
3. Service Performance Summary Report (YTD)

3.1 Performance of measures previously reported to the Infrastructure Overview and Scrutiny Panel are set out here on the basis that these measures provide some insights into service delivery (priority 2).

	Green (Succeeding or achieved)	Amber (Near target)	Red (Needs improvement)
Percentage long term cases reviewed in the last 12 months		X	
No. permanent admissions to care for those aged 65+yrs		X	
Percentage rehabilitation clients still at home after 91 days		X	
Percentage carers assessed or reviewed in the last 12 months	X		
Percentage safeguarding service-user satisfaction	X		
Percentage care-leavers in education, training and employment (19-21yr olds)	X		
Percentage eligible children receiving a 6-8wk review within 8wks	X		
Percentage borough schools rated by Ofsted as Good/Outstanding	X		
Percentage re-referrals to Children's Social Care (within 12mths)		X	
Percentage children subject to a Child Protection Plan for 2+yrs on ceasing		X	
Percentage EHCP assessments completed within 20wks (including exceptions)	X		
Percentage of successful treatment completions (alcohol)	X		
Percentage of successful treatment completions (opiates)	X		
Percentage of successful treatment completions (non-opiates)		X	
TOTAL (14)	8	6	0

4. Adults' Services

4.1. Care package reviews

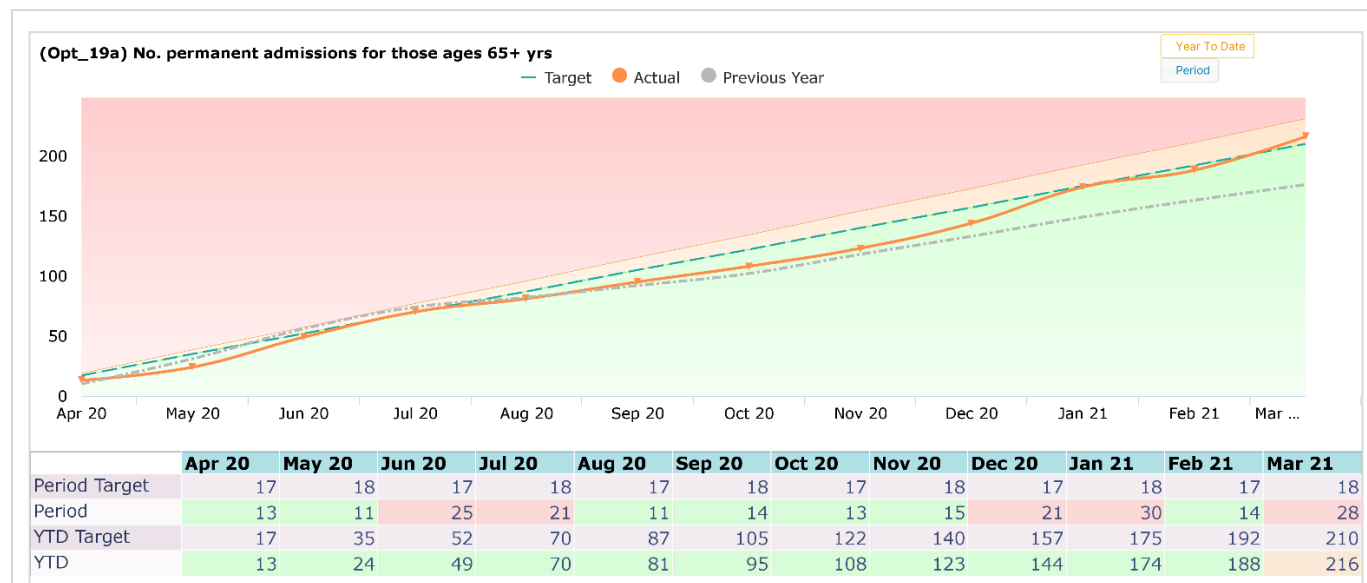


Q4 Commentary

The target for this measure is 85% with red flag raised if performance is equal to/below 75%.

Reviews are a key mechanism for ensuring that the care package in place for each resident is fit for purpose and meeting their needs. As at the close of Q4 the percentage of long-term cases reviewed in the last 12 months stands at 80.6% (732/908), below the target of 85% though within tolerance for the measure. At the start of the financial year performance was at its highest point (April 2020: 83.2%) since February 2018 (84.7%), reflective of focussed resource and successful implementation of the strengths-based approach to ensure that reviews are triggered where they are required and not for isolated issues (e.g. one-off equipment). Subsequent performance in 2020/21 has been impacted by the diversion of resources to the Covid-19 response, as reflected in the downward trend from April to October 2020. Encouragingly however, there has been a sustained improvement since the low of 78.5% in September 2020 through to the end of the year. At the times where resources were diverted to the Covid19 response, all cases due for review were risk assessed to ensure that priority was given to those in most need.

4.2. Permanent admissions to care



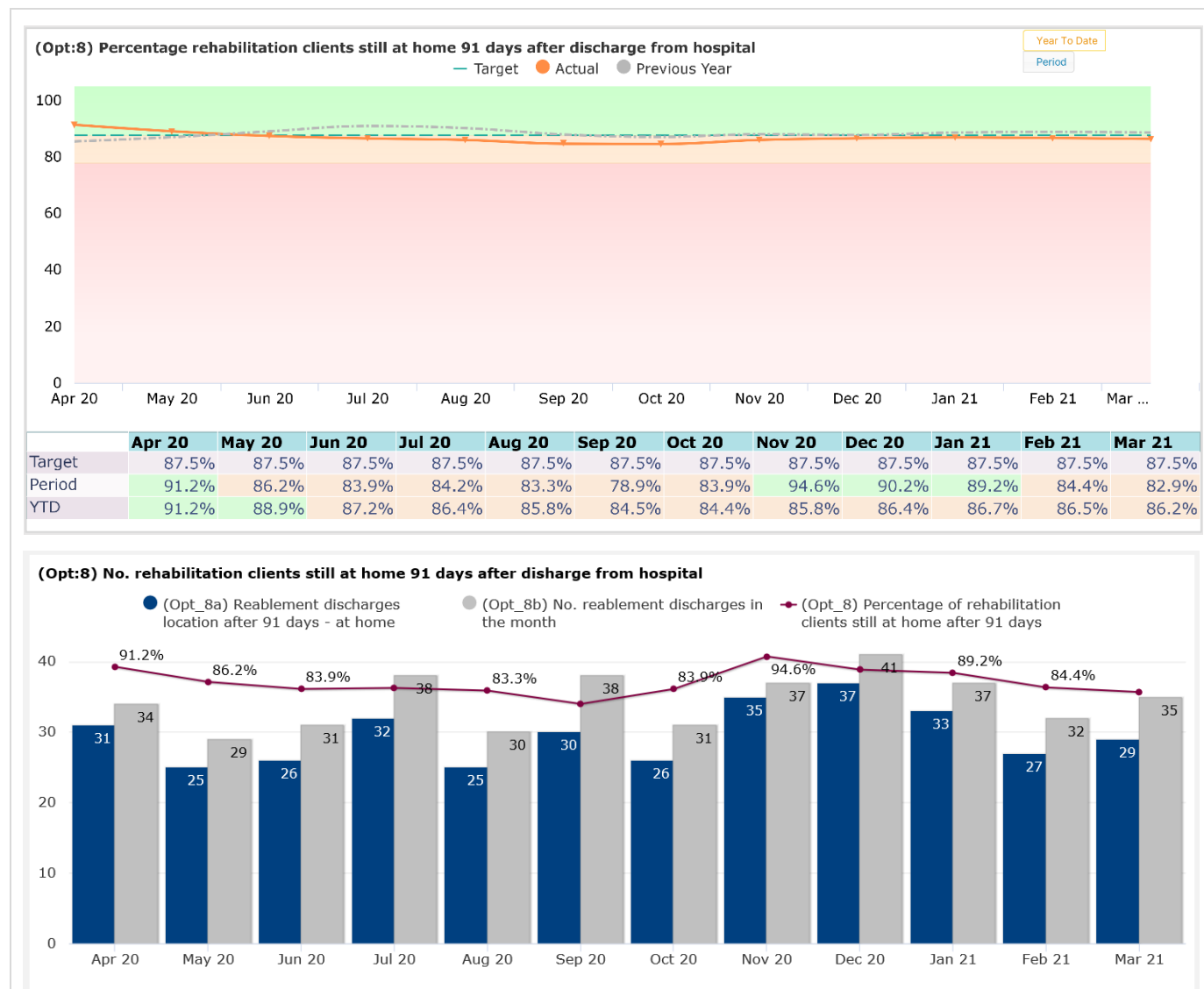
Q4 Commentary

The year-end target for this measure is 210 and profiled monthly. A red flag is raised if YTD volumes are at/exceed 10% of the target.

The focus on prevention and keeping people living in their own homes is having a positive impact on admissions to care, although when residents are subsequently assessed as needing care their needs are often higher and more complex. As at the close 2020/21 the year-to-date volume of permanent admissions to care is 216, an increase of 40 on the 2019/20 year-end outturn of 176. Performance is therefore off-target but within the 10% tolerance for this measure.

The highest volumes of admissions occurred in January 2021 (30) and March 2021 (28). These peaks were triggered by the Covid-19 second wave when there were more hospital admissions and discharges of residents with high care needs to care settings in order to free up hospital beds and prevent further Covid-19 reinfection of residents in the hospital. Not all discharges to care homes were permanent; some were under the 6-week temporary care funding from the Department for Health and Social Care (DHSC) which applied when residents tested positive.

4.3. Reablement

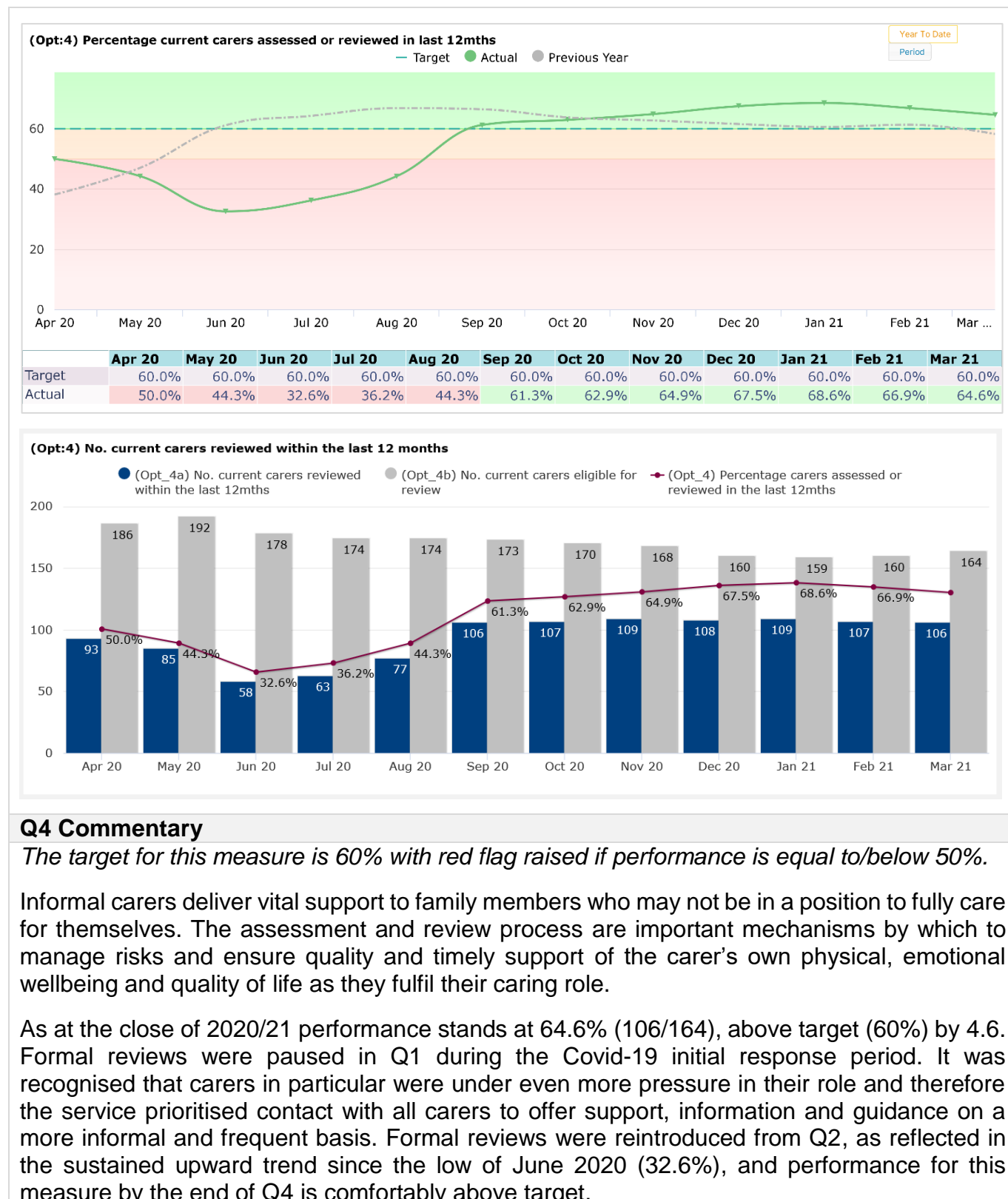


Q4 Commentary

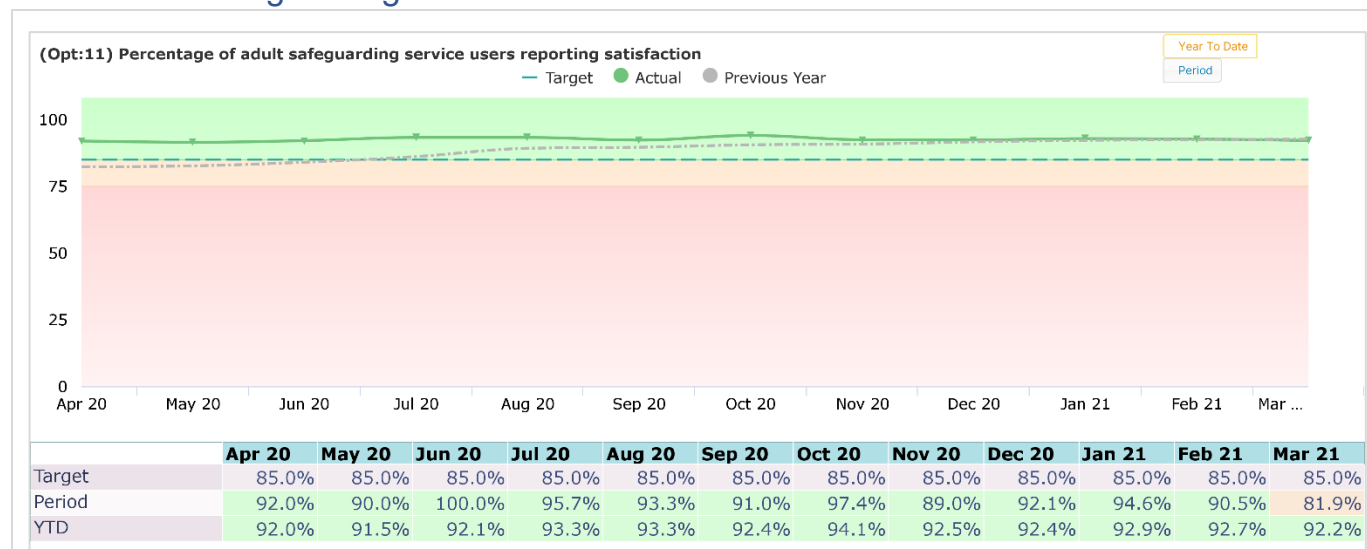
The target for this measure is 87.5% with red flag raised if performance is equal to/below 77.5%.

The service's focus is on prevention and supporting people to live in their own homes for as long as possible, and this includes supporting people on their return home from a hospital stay. As at the close of 2020/21 the year-to-date percentage of rehabilitation clients still at home 91 days after discharge from hospital is at 86.2%, below the target (87.5%) but within agreed tolerance thresholds. Performance of this measure is inevitably impacted by the level of need and frailty of the individuals within the cohort, and in 2020/21 this has been exacerbated by the impact of Covid-19. It is difficult to predict the long-term impact of Covid on individuals' health and wellbeing and this is being kept under constant review.

4.4. Carers' assessments



4.5. Adults' safeguarding



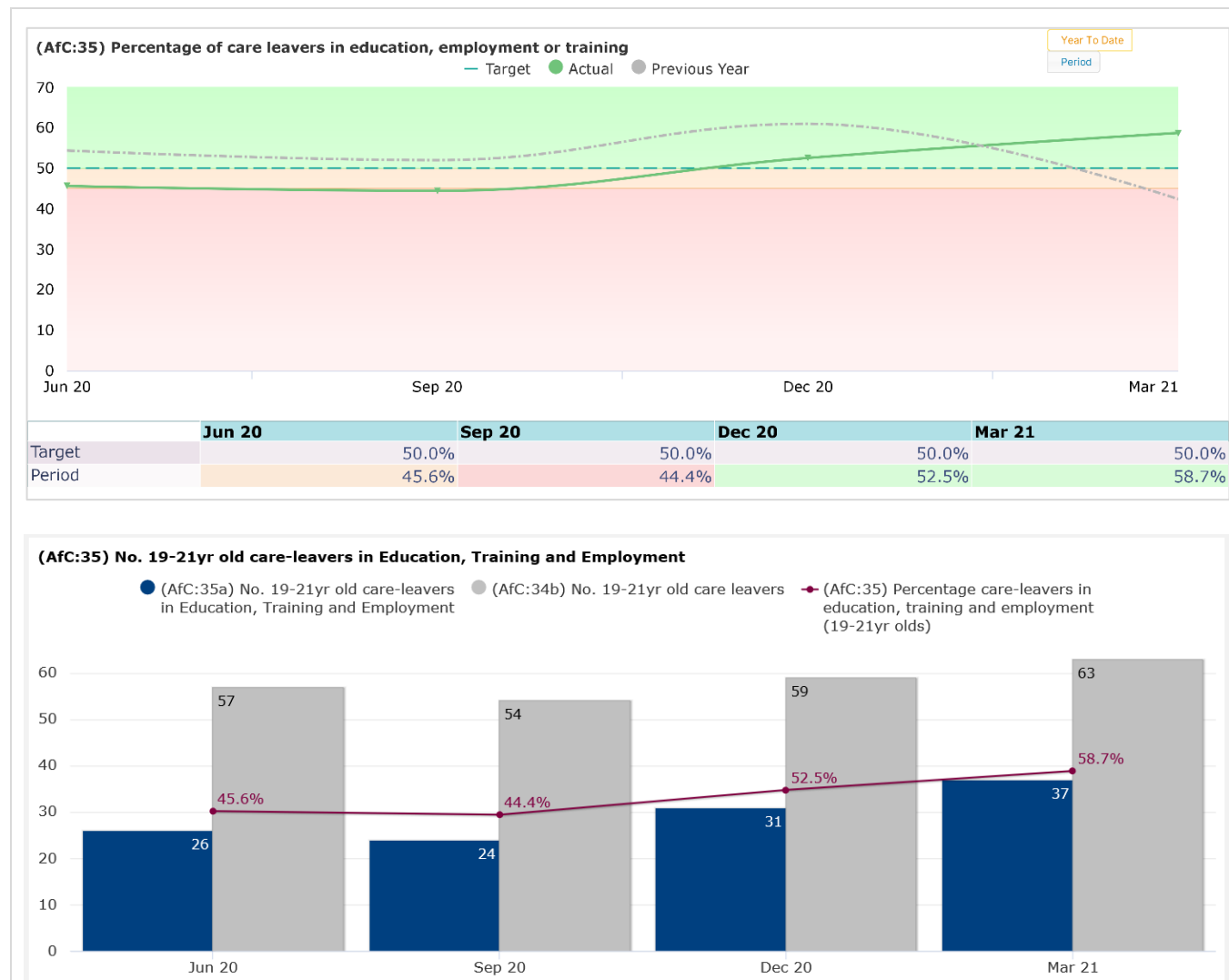
Q4 Commentary

The target for this measure is 85% with red flag raised if performance is equal to/below 75%.

Monitoring safeguarding service-user satisfaction is important to assure that processes are sound and that outcomes sought from the safeguarding investigation have been achieved. The consistently high performance of this measure against the 2019/20 target of 80% led to the target being raised in 2020/21 to 85%. Despite the challenges faced by the service in 2020/21 as a result of the pandemic, the overall year-to-date position stands comfortably above target at 92.2% and is an encouraging indication that existing processes are sound.

5. Children's services

5.1. Care leavers



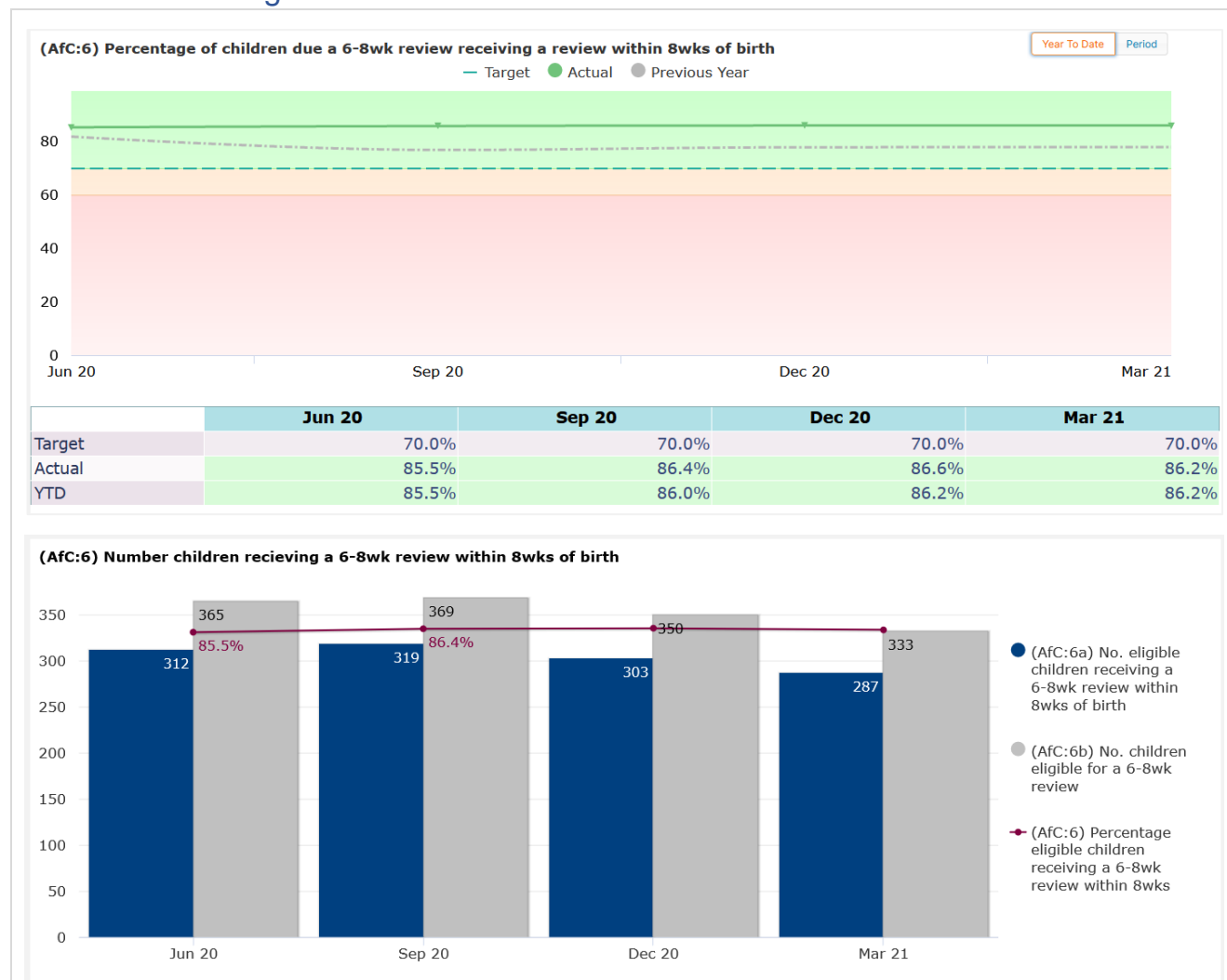
Q4 Commentary

The target for this measure is 50% with red flag raised if performance is equal to/below 45%.

Supporting the wellbeing and aspirations of children in care and supporting care-leavers to achieve their full potential is of paramount importance. At the close of Q4 the percentage of care-leavers in education, employment or training stands at 58.7% (37/63), above target (50%) by 8.7. The impact of the Covid-19 pandemic on the economy was very quickly felt by this cohort of young people, with losses of part-time or zero contracted hours jobs in key sectors (e.g. entertainment) and the cancellation of training opportunities. The Service focused on ensuring that these young people were able to access accommodation and food during the pandemic and it was acknowledged in Q1 that this measure was not expected to bounce back until education and employment opportunities reopened in sufficient volume.

A working group was implemented, "Planning Support for unemployed young people", and delivered through the Job Centre to support young people, and many care-leavers. The support on offer included the Kickstart Scheme and Youth Mentors which has increased the number of care leavers gaining employment and training opportunities through these routes in Q4. A comparison to Q4 in the previous year shows a positive picture as we emerge from the pandemic compared to the start of the pandemic in March 2020.

5.2. Health visiting



Q4 Commentary

The target for this measure is 70% with red flag raised if performance is equal to/below 60%.

The 6-8 week review appointment is an important opportunity for parents to discuss their baby's development and progress with a Health Visitor. As at the close of 2020/21 performance for this measure stands at 86.2% (1,221/1,417) of children due a 6-8 week review receiving a review within 8 weeks of birth. Quarterly performance has remained above target throughout 2020/21 and peaked in Q3 at 86.6% (303/350). It was expected that performance of this measure would fall due to the lockdown restrictions, however the continued high performance is understood to be due to a number of families who were happy to engage in a virtual assessment (where that was appropriate) who would otherwise have declined an in person visit in non-Covid times. It should be recognised that where concerns were established, face to face follow up has taken place.

5.3. School Ofsted ratings

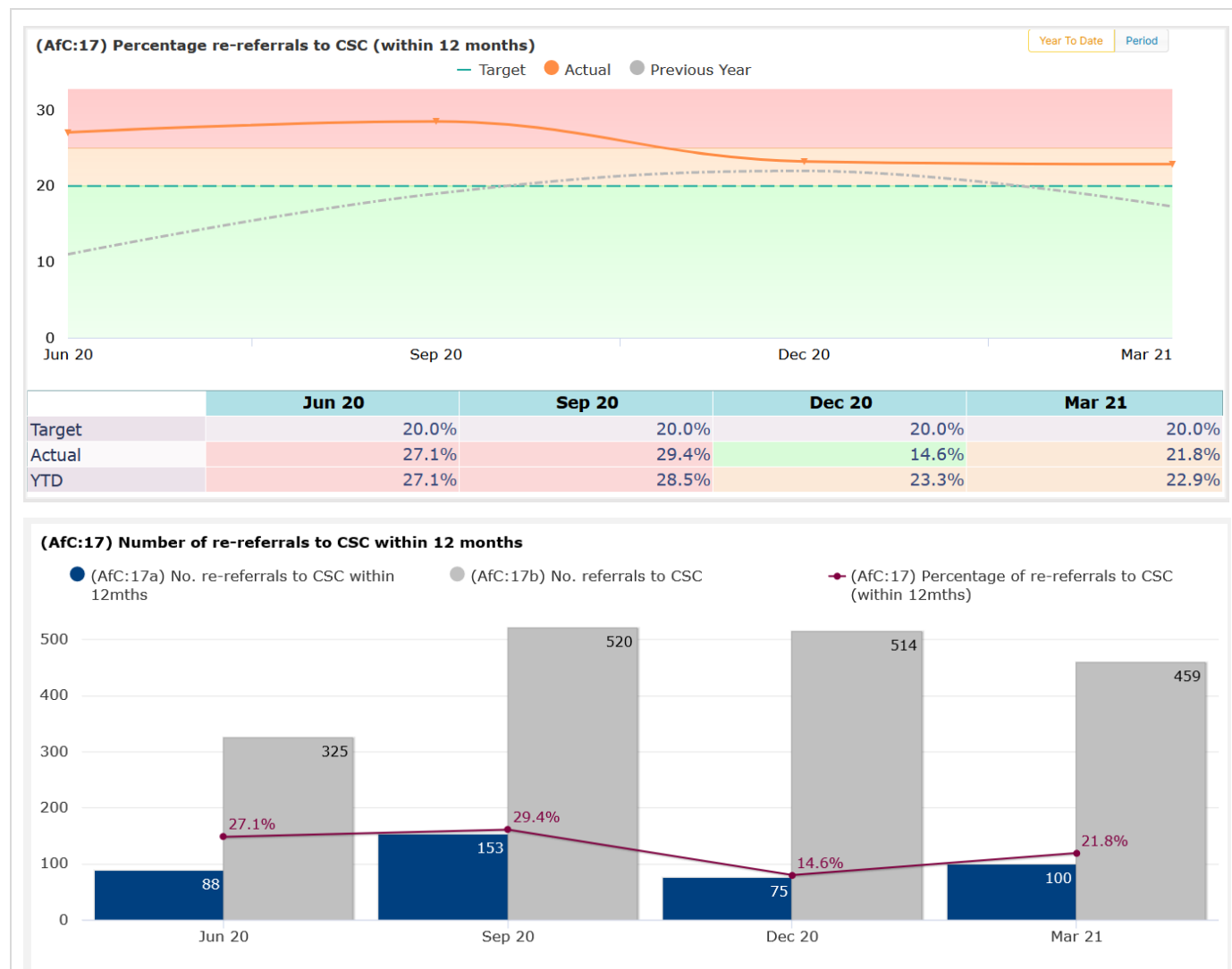


Q4 Commentary

The target for this measure is 70% with red flag raised if performance is equal to/below 60%.

The percentage of borough schools rated by Ofsted as good/outstanding has not changed as Ofsted have paused inspections. There will be no graded inspections until past Easter 2021 and so this indicator will not change until Q1 of 2021/22 at the earliest. The target was increased to 90% for 2020/21 from 86% in 2019/20 and the tolerance thresholds narrowed to a permissible variance of 5 from the target (previously a permissible variance of 10 from target).

5.4. Children's social care



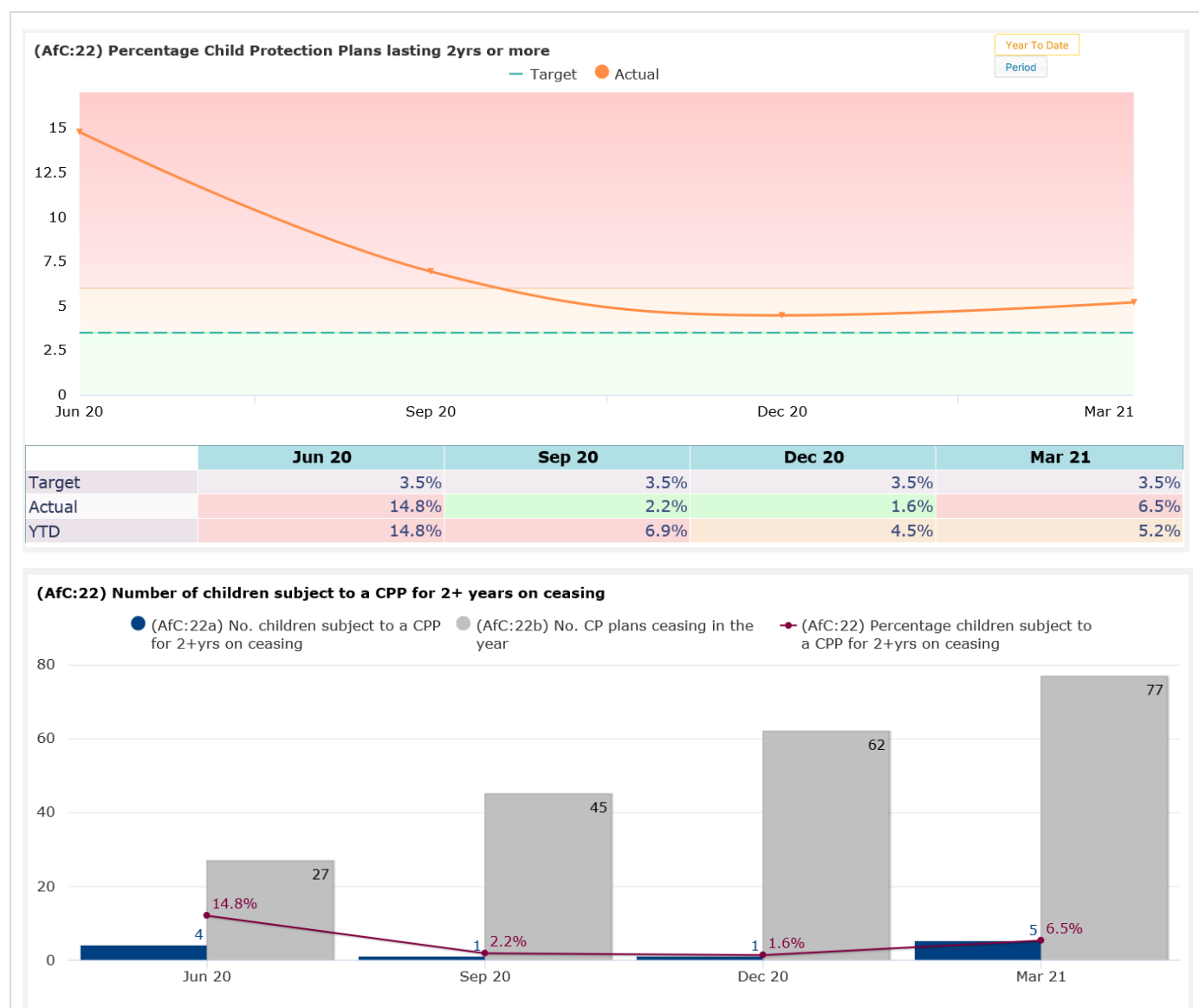
Q4 Commentary

The target for this measure is 20% with red flag raised if performance is equal to/exceeds 25%.

A referral is a request for services to be provided by children's social care and is in respect of a child who is currently not assessed to be in need. A referral may result in an initial assessment of the child's needs, the provision of information or advice, referral to another agency or no further action. This indicator reports the number of referrals that are received within 12 months of a previous referral being received.

As at the close of 2020/21 the year-to-date performance stands at 22.9% (416/1,818), above the target of 20% but within tolerance for this measure. Overall, there has been a 34% increase on the volume of referrals this year (1,818) compared to 2019/20 (1,356), indicative of increased demand during Covid-19. Throughout the year the service has acknowledged that whereas we do see regular fluctuations in the level of re-referrals there is a likely link to Covid-19 as families who were previously in crisis may not have had the resilience to withstand the additional pressures of another lockdown, such as the closure of schools and the reduction in face-to-face services for non-statutory services. Service managers scrutinise all children re-referred at monthly performance boards. This provides reassurance that we are confident about thresholds and enables learning on an individual case basis to be shared.

Adults, Children & Health Overview and Scrutiny Panel: End of Year Data & Performance Report



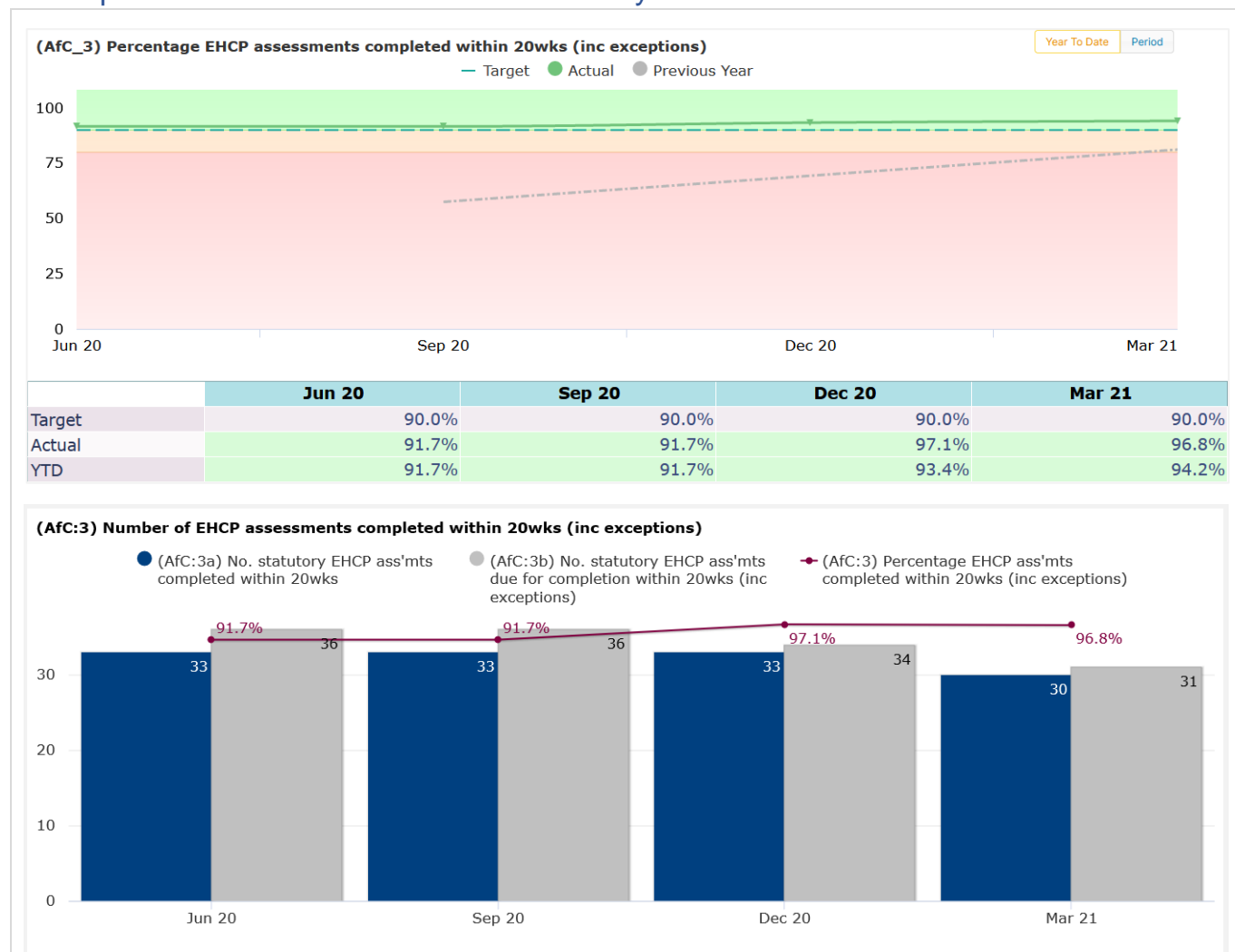
Q4 Commentary

The target for this measure is 3.5% with red flag raised if performance is equal to/exceeds 6%.

In Q4 there were 5 children who were subject of a Child Protection Plan for more than 2 years out of the 77 children on plans ceasing in the year (6.5%). This accounted for a single sibling group. As at the close of 2020/21 the year-to-date performance stands at 5.2%, above the target (3.5%) by 1.7 but within agreed tolerance for the measure.

The service regularly reviews all children who have been subject to a Child Protection Plan for 10 months or more to systematically prevent plans reaching 18+ months. Child Protection chairs also regularly review and challenge the contingency plans that are put forward at each Review Child Protection Conference (RCPC), and in July 2020 a new midway review process was introduced to empower social care teams to start thinking of an exit strategy prior to RCPCs. The service is also using the Windows into Practice Panel to discuss and agree effective and meaningful interventions. On the rare occasion a child is subject to a protection plan for more than 18 months, the plans are regularly scrutinized by senior managers to ensure appropriate alternative plans are considered in good time. Due to the impact of Covid-19, some children have remained subject to a CP plan due to dual care planning process. The courts have made court orders that have seen some children remaining in the care of their birth parents.

5.5. Special Educational Needs and Disability



Q4 Commentary

The target for this measure is 90% with red flag raised if performance is equal to/below 80%.

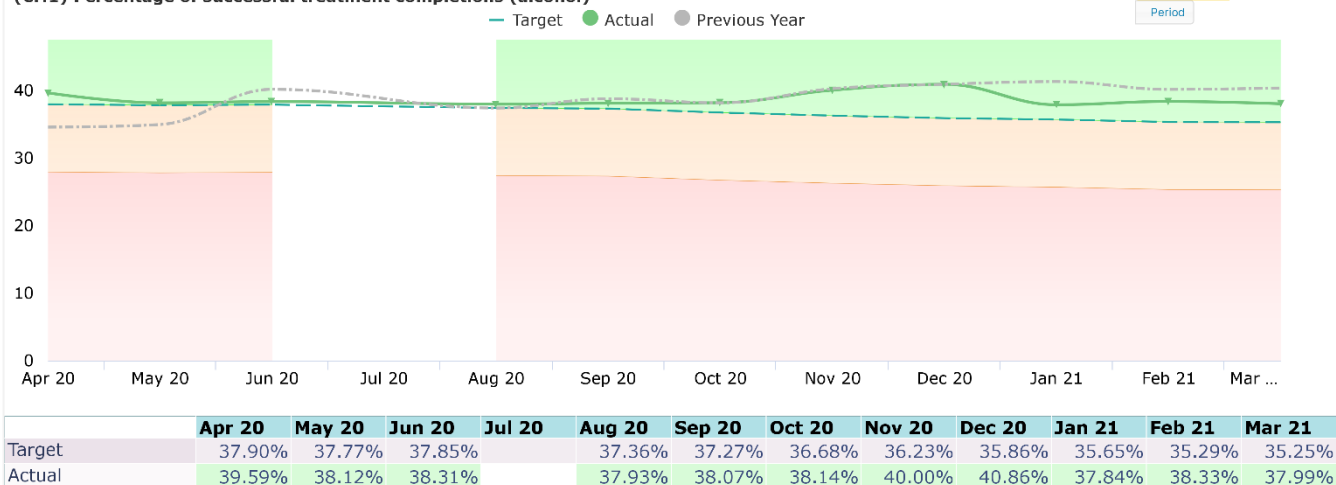
An Education, Health and Care Plan is a legal document that describes a child or young person's special educational, health and social care needs. It explains the extra help that will be given to meet those needs and how that help will support the child or young person to achieve what they want to in their life.

Whilst it was initially anticipated that performance would be detrimentally impacted by service pressures as a result of the Covid-19 pandemic, performance for this measure has remained consistently high. At the close of 2020/21 the year-to-date percentage of EHCP assessments completed within 20 weeks is 94.2% (129/137), an improvement on 2019/20 year-end outturn of 81.2% (108/133). Work is focused with professionals and families to continue to drive up the quality of the plans to ensure that the needs of the young person are at the centre of the work.

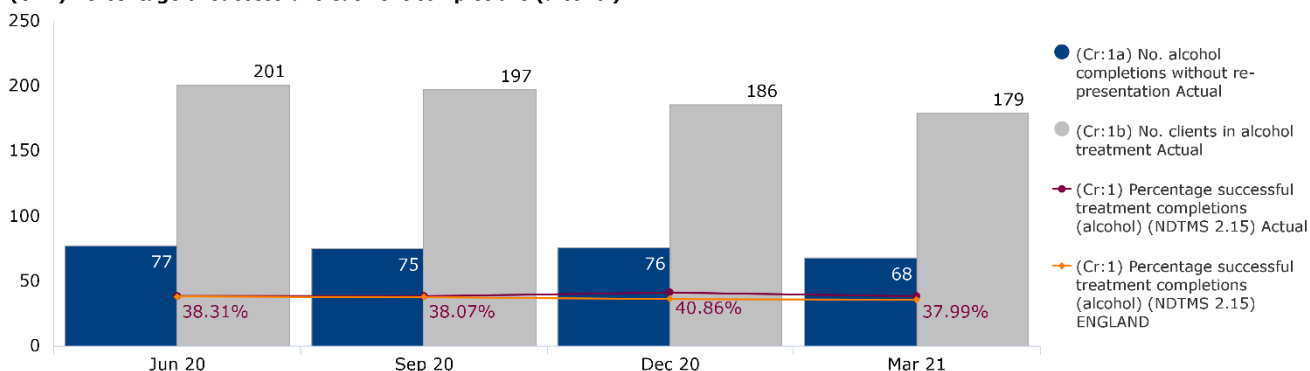
6. Public Health

6.1. Substance misuse: Alcohol

(Cr:1) Percentage of successful treatment completions (alcohol)



(Cr:1) Percentage of successful treatment completions (alcohol)



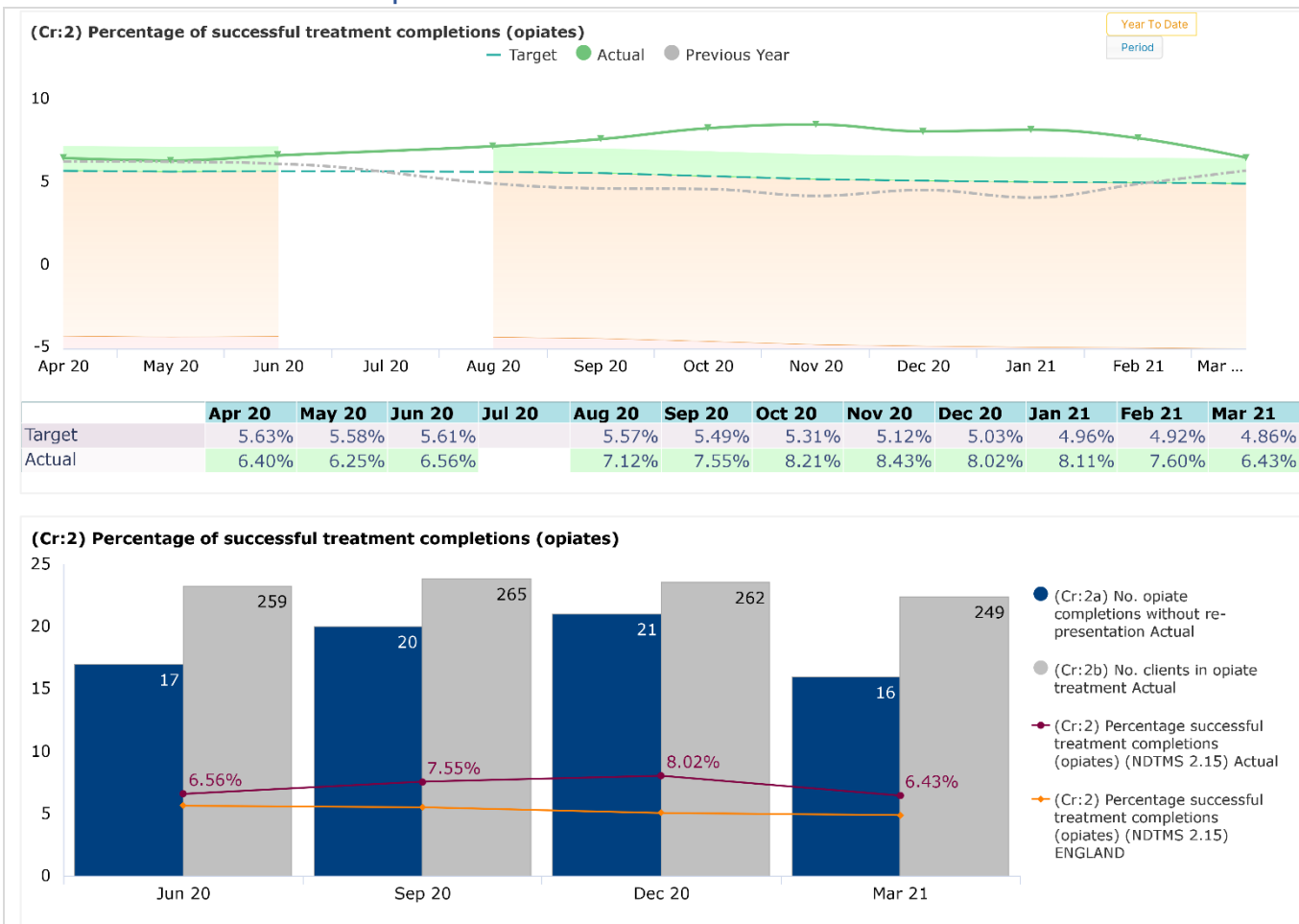
Q4 Commentary

Local performance is tracked against the reported figure for England (referenced in Chart 1 as the target). There is a 10% tolerance threshold. Please note that the National Drug Treatment Monitoring Service (NDTMS) is closed during July, meaning that no data is reported for this month.

The definition of this measure is the number of alcohol users that left structured treatment successfully (free of alcohol dependence) who do not then re-present to treatment within six months expressed as a percentage of the total number of alcohol users in structured treatment. The Resilience service is available to anyone over the age of 18 living in the borough who is experiencing problems with alcohol and/or drugs. The service can be accessed via self-referral or a referral from GPs or other professionals.

As at the close of 2020/21 the percentage of successful treatment completions for alcohol stands at 37.99% above England target of 35.25% by 2.74. Throughout 2020/21 RBWM completions have consistently exceeded England reported figures. Generally, it tends to be lifestyle drugs like alcohol that people find easier to abstain from, and the growing market for non-alcoholic drinks may be a contributing factor to the relatively stable number of successful completions without re-presentation. Trends will continue to be monitored for an emerging evidence-base.

6.2. Substance misuse: Opiates



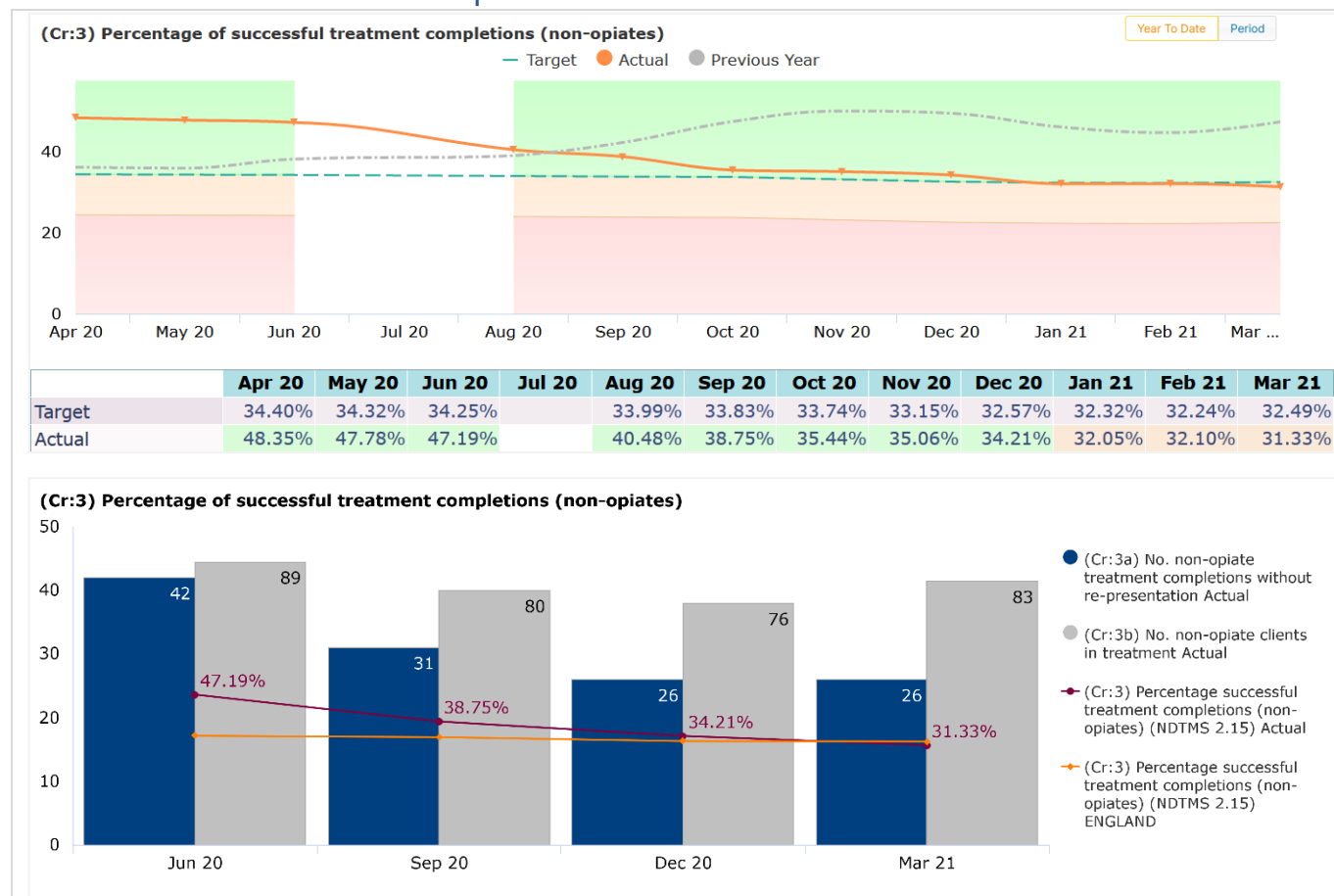
Q4 Commentary

Local performance is tracked against the reported figure for England (referenced in Chart 1 as the target). There is a 10% tolerance threshold. Please note that the National Drug Treatment Monitoring Service (NDTMS) is closed during July, meaning that no data is reported for this month.

The definition of this measure is the number of users of opiates that left drug treatment successfully (free of drug(s) dependence) who do not then re-present to treatment again within six months as a percentage of the total number of opiate users in treatment. The Resilience service is available to anyone over the age of 18 living in the borough who is experiencing problems with alcohol and/or drugs. The service can be accessed via self-referral or a referral from GPs or other professionals.

As at the close of 2020/21 the percentage of successful treatment completions for opiates stands at 6.43%, above the England reported figure of 4.86% by 1.57. Throughout 2020/21 RBWM completions have followed an upward trend up to February 2021, in contrast to England reported figures which have consistently decreased month on month. The volume of successful treatment completions without re-presentation could possibly be due to the changes in service provision implemented as a result of Covid-19 and associated lockdown restrictions; psychosocial interventions were moved to online platforms and attendance and commitment improved. It is acknowledged, however, that this is a multiple-disadvantaged, complex cohort who are engaged with a number of services. Recent universal funding for drug and alcohol services from Public Health England will be used to pilot a more intensive, multi-agency joined-up approach for this group. The findings from this pilot will help shape commissioning proposals for future drug and alcohol services from April 2022.

6.3. Substance misuse: Non-opiates



Q4 Commentary

Local performance is tracked against the reported figure for England (referenced in Chart 1 as the target). There is a 10% tolerance threshold. Please note that the National Drug Treatment Monitoring Service (NDTMS) is closed during July, meaning that no data is reported for this month.

The definition of this measure is the number of users of non-opiates that left drug treatment successfully (free of drug(s) dependence) who do not then re-present to treatment again within six months as a percentage of the total number of non-opiate users in treatment. The Resilience service is available to anyone over the age of 18 living in the borough who is experiencing problems with alcohol and/or drugs. The service can be accessed via self-referral or a referral from GPs or other professionals.

As at the close of 2020/21 the percentage of successful treatment completions for non-opiates stands at 31.33%, below the target of 32.49% by 1.16, but within tolerance for the measure. Successful treatment completions for non-opiates have followed a consistent downward trend since the beginning of the year, and from January 2021 went below the England rate. Non-opiates tend to be lifestyle drugs which, generally, people find easier to abstain from and change behaviour. There is an increasing prevalence of online support networks and programmes, which serve as an additional support between formal key worker sessions and therefore aid recovery. As a result of Covid-19 and associated lockdown restrictions, clients have been directed to more online self-support services, and this may account for the declining numbers of clients in treatment at the end of Qs 2 and 3.

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Report Title:	Progress update on the outcome of the reviews of Achieving for Children and Optalis delivery arrangements
Contains Confidential or Exempt Information	No - Part I
Cabinet Member:	Councillor Carroll, Deputy Chairman of Cabinet, Cabinet Member for Adult Social Care, Children's Services, Health and Mental Health
Meeting and Date:	Adults, Children and Health Overview and Scrutiny Panel – 9 June 2021
Responsible Officer(s):	Hilary Hall, Executive Director of Adults, Health and Housing Lynne Lidster, Head of Commissioning - People
Wards affected:	All

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REPORT SUMMARY

As part of the budget setting process for 2020-2021, it was recommended that the arrangements that the Royal Borough has through Achieving for Children and Optalis for the delivery of children's and adult services respectively should be reviewed to ensure that they were fit for purpose. The Chartered Institute of Public Finance and Accountancy (CIPFA) was commissioned in April 2020 to undertake the review. The aim of the review was to understand whether the current arrangements, which have been in place since 2017, were still the appropriate models to deliver the Council's ongoing strategic transformation objectives for adult and children's services.

Both reports were presented to Cabinet in July 2020; Cabinet accepted the recommendations in both reports and recommended that the actions be reported to the relevant Overview and Scrutiny Panel. Following the Cabinet decision, action plans were developed in partnership with Achieving for Children and Optalis, to implement the recommendations (Appendices 1 and 2).

All the actions are either completed or have made substantial progress for completion by September 2021.

1. DETAILS OF RECOMMENDATION(S)

RECOMMENDATION: That Adults, Children and Health Overview and Scrutiny Panel notes the report and:

- i) **Notes the progress made to implement the recommendations made by Cipfa following the reviews undertaken of Achieving for Children and Optalis in 2020.**

2. REASON(S) FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED

Options

Table 1: Options arising from this report

Option	Comments
Note the progress made to implement the recommendations following the Cipfa reviews of Achieving for Children and Optalis This is the recommended option	This is the recommended option to ensure the recommendations in the reports are implemented.
Do nothing	This is not recommended as the Overview and Scrutiny Panel has been asked to note the progress on the action plans in order to ensure the recommendations are implemented.

- 2.1 As part of the budget setting process for 2020-2021, it was recommended that the arrangements that the Royal Borough has through Achieving for Children and Optalis for the delivery of children's and adult services respectively should be reviewed to ensure that they were fit for purpose. The Chartered Institute of Public Finance and Accountancy (CIPFA) was commissioned in April 2020 to undertake the review. The aim of the review was to understand whether the current arrangements, which have been in place since 2017, were still the appropriate models to deliver the Council's ongoing strategic transformation objectives for adult and children's services.
- 2.2 Both reports were presented to Cabinet in July 2020; Cabinet accepted the recommendations in both reports and recommended that the actions be reported to the relevant Overview and Scrutiny Panel. Following the Cabinet decision, action plans were developed in partnership with Achieving for Children and Optalis, to implement the recommendations (Appendices 1 and 2).
- 2.3 Appendices 1 and 2 show that all the actions are either completed or substantially underway, with completion of all outstanding actions scheduled by September 2021. In relation to both companies, a review of the capacity and skills in the Royal Borough's finance team has been undertaken and a new structure is in development. Similarly, additional capacity in the strategic commissioning service was agreed in the 2021-2022 budget and a new structure there is also in development.
- 2.4 Specifically, in relation to Achieving for Children, improvements have been implemented in terms of:
- A shared understanding of the costs of children's services between the Royal Borough and Achieving for Children.
 - Approval of Achieving for Children's business plan and Medium Term Financial Plan by Cabinet, with approval of the Sufficiency Strategy in June 2021.
 - Development a new data pack (management information including finance).

- 2.5 In relation to Optalis, a business plan through to 2023 has been agreed and work with Wokingham Borough Council on a revised shareholder agreement is progressing well. Optalis is a key player in the adult social care transformation programme, specifically leading on the review of the “front door” and the reconfiguration of the Short Terms support and Reablement Service.

3. KEY IMPLICATIONS

Table 2: Key Implications

Outcome	Unmet	Met	Exceeded	Significantly Exceeded	Date of delivery
Delivery of Achieving for Children and Optalis action plans	Action plan not achieved	100% of actions completed	n/a	n/a	September 2021

4. FINANCIAL DETAILS / VALUE FOR MONEY

- 4.1 There are no financial implications arising from the recommendations in this report.

5. LEGAL IMPLICATIONS

- 5.1 There are no legal implications arising from this report.

6. RISK MANAGEMENT

Table 3: Impact of risk and mitigation

Risk	Level of uncontrolled risk	Controls	Level of controlled risk
Failure to deliver the action plans	MEDIUM	Robust management and monitoring through Commissioning Board and Overview and Scrutiny Panel	LOW

7. POTENTIAL IMPACTS

- a. Equalities. The recommendation in this report does not change the existing Equality Impact Assessments undertaken at the time the two companies were established.
- b. Climate change/sustainability. There are no climate / environmental impacts associated with these proposals.

- c. Data Protection/GDPR. No personal data is being processed and a Data Protection Impact Assessment is not required.

8. CONSULTATION

- 8.1 A number of interviews with representatives of the Royal Borough, Optalis and Achieving for Children were undertaken by CIPFA as part of the reviews. The final reports were taken to Cabinet and shared with the respective joint owning councils – Wokingham Borough Council (Optalis); Royal Borough of Kingston-upon-Thames and London Borough of Richmond upon Thames (Achieving for Children).

9. TIMETABLE FOR IMPLEMENTATION

Table 4: Implementation timetable

Date	Details
September 2021	Completion of all remaining actions in the action plans

10. APPENDICES

- 10.1 This report is supported by two appendices:
- RBWM AfC action plan updated May 2021
 - RBWM Optalis action plan updated May 2021

11. BACKGROUND DOCUMENTS

- 11.1 This report is supported by one background document:
- Cabinet report: Outcome of review of Achieving for Children and Optalis delivery arrangements, July 2020 [Microsoft Word - Cab rpt CIPFA Optalis AFC reviews 03.07.20.docx \(moderngov.co.uk\)](#)

12. CONSULTATION (MANDATORY)

Name of consultee	Post held	Date sent	Date returned
Hilary Hall	Executive Director of Adults, Health and Housing	27/05/21	28/05/21

REPORT HISTORY

Decision type:	Urgency item?	To follow item?
N/A	N/A	N/A

Report Author: Lynne Lidster, Head of Commissioning – People 07554 459628

Royal Borough of Windsor & Maidenhead and Achieving for Children Action Plan

CIPFA REC	ACTION	PROGRESS	STATUS
1	Review RBWM finance capacity and skills in order to ensure that there is effective management and oversight of the AfC contract.	A review of the capacity and skills in the borough's finance team has been undertaken and a new structure is in development to be implemented by September 2021.	In progress
2	Review RBWM strategic commissioning capacity and skills to ensure that there is effective management and oversight of the AfC contract.	A new post for the Strategic Commissioning and Procurement function for the council has been approved and budget agreed at Cabinet in February 2021. This new post and resulting structure will provide more resilience and capacity across the team as a whole. The new structure will be implemented by September 2021.	In progress
1 & 2	Review the RBWM attendance on the AfC Board of Directors to ensure attendees have the relevant skills.	A review of the board of directors, including a skills analysis as a whole, has been completed including the attendees for the Royal Borough. A recruitment process has been completed for the two vacant non-executive independent directors and the positions have been appointed to.	Complete
3	RBWM and AfC to work together to gain a shared understanding of the costs of children's services	Monthly meetings are held between the Chief Operating Officer of Achieving for Children and Chief Executive and S. 151 Officer for the Royal Borough. The Royal Borough's Head of Finance attends the monthly commissioning meeting where the financial position is reported. The Medium-Term Financial Plan was produced by Achieving for Children and was approved by Cabinet as part of the reserved matters. Work was undertaken as part of the budget setting process to gain a shared understanding of the costs of children's services between the Royal Borough and Achieving for Children and the Cabinet Member for Finance was briefed.	Complete
4	RBWM and AfC to agree the contents and frequency of a data pack (management information including finance) for the RBWM Commissioning Meeting and the borough's Chief Executive	The draft monthly data pack was presented to the Royal Borough's Commissioning Board in May 2021. The revised data pack will include management information including the costs of care for children and also monthly budget monitoring and progress on achieving savings, and will go live before September 2021.	In progress

CIPFA REC	ACTION	PROGRESS	STATUS
4	Future demand for children's services to be mapped and a strategy agreed between AfC and RBWM to manage and meet future demand.	The Medium Term Financial Plan for Achieving for Children has been approved by the Cabinet and a Sufficiency Strategy to enable Achieving for Children to meet the cost of care for children has been produced and agreed by the Royal Borough's Commissioning Board; the strategy will be presented to Cabinet for final approval in June 2021. The procurement and commissioning function within Achieving for Children has been strengthened with the addition of specialist posts to deliver the Sufficiency Strategy.	Complete
5	RBWM and AfC to agree the costs of children's services including future demand and agree a strategy for 2021 - 2025 to manage the financial consequences of demand.	As described above, the MTFP has been approved by Cabinet and the Sufficiency Strategy will be presented to Cabinet in June 2021. Following approval of the Sufficiency Strategy, Achieving for Children will undertake options appraisals and business cases in order to deliver the strategy which will be presented to the Commissioning Board. Any financial consequences of those actions will follow the usual process for financial approval.	Complete
6	Strategy for managing financial consequences of future demand to be appended to AfC business plan 2020-2024.	The business plan for Achieving for Children and the MTFP have been approved by Cabinet.	Complete
7	AfC to produce a briefing paper describing breakdown of contract price including central costs, management overheads and support services.	This was produced as part of developing the MTFP and presented to the Cabinet Member for Finance.	Complete
7 & 8	AfC and RBWM to agree the type and level of support services required.	The Service Level Agreement for Human Resources between the Royal Borough and Achieving For Children has been agreed for 20/21. The Service Level Agreement for IT is being developed and will be agreed before September 2021.	In progress
9	RBWM to agree with Kingston and Richmond a strategic direction for AfC.	The Business Plan for Achieving for Children was agreed by the Ownership Board and was presented to Cabinet. A Business Development Strategy for the company was appended to the Business Plan.	Complete

Royal Borough of Windsor & Maidenhead and Optalis

CIPFA REC	ACTION	PROGRESS	STATUS
1	RBWM and Wokingham Borough Council to agree apportionment of central Optalis costs to March 2021 and the approach going forward	The apportionment of central Optalis overhead costs for previous years to March 2021 has been agreed between the Royal Borough and Wokingham Borough Council, as have the principles for the approach going forward.	Complete
2 & 3	RBWM to ask Wokingham Borough Council to clearly set out its position with regard to Optalis and to agree a revised Shareholder's Agreement	This work is progressing well.	In progress
4	Optalis to develop a strategy to deliver actions in the RBWM Adult Services Transformation Plan including a step change to prevention and early intervention	The Transformation Programme for adult social care is progressing under the governance of the Programme Board and Project Team. Optalis are leading on two specific projects in 2020-2021: <ul style="list-style-type: none"> • Reviewing "front door" to ensure that people who contact adult social care receive the most appropriate advice and information, including referrals to community based support, to prevent the need for long term paid support. • Reconfiguration of the Short Term and Reablement Service to enable the team to support more people who have been discharged from hospital to regain skills and independence. 	In progress
4	Review RBWM finance capacity and skills in order to ensure that there is effective management and oversight of the Optalis contract	A review of the capacity and skills in the borough's finance team has been undertaken and a new structure is in development to be implemented by September 2021.	In progress
4	Optalis to develop a clear business plan and strategy for the next 3 years	Optalis has an agreed business plan and strategy up to 2023.	Complete

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Agenda Item 8

WORK PROGRAMME - ADULTS, CHILDREN & HEALTH OVERVIEW AND SCRUTINY PANEL

DIRECTORS	<ul style="list-style-type: none"> • Duncan Sharkey (Managing Director- RBWM) • Kevin McDaniel (Director of Children's Services - RBWM) • Hilary Hall (Director Adults, Health & Commissioning and Director of Adult Social Services)
LINK OFFICERS AND HEADS OF SERVICES	<ul style="list-style-type: none"> • Lin Ferguson (Director of Children's Social Care and Early Help - AFC) • Clive Haines (Schools Leadership Development Manager – AfC) • Lynne Lidster (Head of Commissioning- Adults and Children) • Nikki Craig (Head of HR, IT and Corporate Projects)

MEETING: 22 SEPTEMBER 2021

ITEM	RESPONSIBLE OFFICER
Children's Services Improvement Plan Progress	Kevin McDaniel/Lin Ferguson
Update on FUEL (activities for disadvantaged pupils) programme	Kevin McDaniel/Lin Ferguson
Day Centre Consultation	Hilary Hall/Lynne Lidster
Annual Compliments and Complaints Report	Claire Burns
Transforming Adult Social Care (Front Door Services and Reablement)	Hilary Hall/Michael Murphy
Work Programme	Panel clerk
TASK AND FINISH	

MEETING: 20 JANUARY 2022

ITEM	RESPONSIBLE OFFICER
Budget Report	Adele Taylor
Virtual School Report – Including work with Care Leavers	Kevin McDaniel / Lin Ferguson (invite Michael Guard)
High Needs Funding for Children with Special Educational Needs	Kevin McDaniel / Clive Haines
Annual Education Standards Report – including impact of Covid on Post-16 Education	Kevin McDaniel / Clive Haines
Work Programme	Panel clerk
TASK AND FINISH	

MEETING: 27 APRIL 2022

ITEM	RESPONSIBLE OFFICER
Family Hubs implementation one year on	Kevin McDaniel / Lin Ferguson
Implementation of Health and Care White Paper	Hilary Hall
Work Programme	Panel clerk
TASK AND FINISH	

ITEMS SUGGESTED BUT NOT YET PROGRAMMED

ITEM	RESPONSIBLE OFFICER
Update on Lynwood Clinic	
Youth Groups Report (where do young people engage with the council?)	